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Report to the Ranking Member,
Committee on Oversight and
Government Reform, House of
Representatives

April 2009

MILITARY DISABILITY RETIREMENT

Closer Monitoring Would Improve the Temporary Retirement Process



GAO

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Highlights of [GAO-09-289](#), a report to the Ranking Member, Committee on Oversight and Government Reform, House of Representatives

Why GAO Did This Study

Service members found unfit for duty due to a service-related illness or injury may be eligible for military disability retirement. When their disability is not stable, however, they may be placed on the military's Temporary Disability Retired List (TDRL) and granted temporary benefits for as long as 5 years. GAO was asked to respond to concerns about TDRL caseloads, management, and impact on servicemembers. To address these concerns, we analyzed TDRL data; interviewed military officials; reviewed laws, regulations, and other relevant documents; and conducted 12 focus groups with temporary retirees. This report examines (1) recent trends in the TDRL caseload size, (2) recent trends in the characteristics of those placed on the TDRL, (3) disability retirement outcomes for TDRL placements, (4) the adequacy of TDRL management, and (5) the adequacy of information provided to TDRL retirees.

What GAO Recommends

To improve TDRL management, DOD should evaluate the quality and consistency of TDRL decisions and take steps to ensure timely reexaminations and final disability determinations. The services should also provide adequate information about the TDRL to temporary retirees. Finally, the Congress may wish to reconsider the 5-year maximum for the TDRL. DOD concurred with each of our recommendations and provided technical comments that we incorporated in our report as appropriate.

To view the full product, including the scope and methodology, click on [GAO-09-289](#). For more information, contact Daniel Bertoni at (202) 512-7215 or bertonid@gao.gov.

MILITARY DISABILITY RETIREMENT

Closer Monitoring Would Improve the Temporary Retirement Process

What GAO Found

TDRL caseloads within the Department of Defense (DOD) grew by 43 percent, from 9,983 in fiscal year 2003 to 14,285 in fiscal year 2007. Growth in caseloads could be attributable to a combination of increases in the number of cases going through the military's disability evaluation system, higher TDRL placement rates, and low numbers of cases removed from the TDRL relative to new cases added to the list.

DOD-wide, servicemembers placed on the TDRL in each calendar year from 2000 through 2007 varied little with respect to their military status, years of service, and disabilities. In each of these years, most TDRL placements had been active duty personnel, although the small proportion who had been reservists grew considerably. Most TDRL placements in each year also had fewer than 20 years of service and, over time, their average years of service declined. The disabilities most prevalent among TDRL placements were musculoskeletal, mental, or neurological in nature. Among those with mental and neurological disabilities, the incidence of post traumatic stress disorder and conditions related to traumatic brain injury increased substantially across the services.

Although the experiences of temporary disability retirees varied, some outcomes were more common than others. DOD-wide, very few who were placed on the list between calendar years 2000 and 2003 returned to military service. Further, about half received a final determination within 3 years and, of those who ultimately received permanent disability benefits, 73 percent had final disability ratings that were no different than their initial ratings. Finally, only 7 percent of TDRL placements, DOD-wide, received a final disability rating that qualified them for permanent disability payment amounts higher than their TDRL payments.

DOD and the services do not effectively manage key aspects of the TDRL process. The military does not systematically examine physical evaluation board (PEB) stability decisions for accuracy and consistency or routinely compile information on TDRL outcomes to better inform its assessments of stability. According to TDRL administrative staff, ensuring that medical reexaminations are done in TDRL cases at least once every 18 months is often a challenge. However, the military does not monitor the extent to which this requirement is met. Moreover, there is limited use of nonmilitary physicians to perform reexaminations, which could reduce burdens on medical treatment facilities. Finally, military procedures do not ensure consistent enforcement of TDRL rules.

Information about the TDRL that the services provide is not always clear or complete and can be difficult to access. PEB findings forms provided to temporary retirees do not fully explain why service members are placed on the list or what is required of them. Temporary retirees reported that counseling related to PEB decisions was inconsistent and lacking in follow-through. Information from military pamphlets, brochures, fact sheets, and Web sites is often incomplete or difficult to find. Temporary retirees participating in our focus groups expressed considerable confusion about and dissatisfaction with their limited access to information and points of contact.

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Abbreviations

DMDC	Defense Manpower Data Center
DOD	Department of Defense
FAQ	frequently asked questions
OEF	Operation Enduring Freedom
OIF	Operation Iraqi Freedom
MTF	military treatment facility
PDRL	Permanent Disability Retired List
PEB	physical evaluation board
PEBLO	Physical Evaluation Board Liaison Officer
PTSD	Post Traumatic Stress Disorder
TDRL	Temporary Disability Retired List
TBI	Traumatic Brain Injury
VA	Department of Veterans Affairs
VASRD	Department of Veterans Affairs Schedule for Rating Disabilities

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United States Government Accountability Office
Washington, DC 20548

April 13, 2009

The Honorable Darrell Issa
Ranking Member
Committee on Oversight and Government Reform
House of Representatives

Dear Mr. Issa:

Since the beginning of Operations Enduring Freedom and Iraqi Freedom, the number of servicemembers entering the military disability evaluation system has grown, along with concerns that the system may not serve returning wounded warriors very well. Recent evaluations by GAO and others have found a number of problems,¹ including lengthy case processing times, inadequate staff training, inconsistencies in disability ratings, and confusion and distrust on the part of servicemembers who must navigate the system. In an effort to streamline military disability determinations, the Department of Defense (DOD) is currently engaged in a joint pilot with the Department of Veterans Affairs (VA) to test the use of VA medical examinations to inform military disability decisions, but significant challenges to addressing weaknesses in the military's overall disability evaluation system remain.

The Temporary Disability Retired List (TDRL) is one aspect of this system that is currently receiving increased attention. Servicemembers may be placed on the TDRL if they are found to be medically unfit for duty (disabled) by a military Physical Evaluation Board (PEB), but their service-related illnesses or injuries are not stable enough for the PEB to assign them a permanent disability rating. A determination assigning servicemembers to the TDRL temporarily retires and provides them with disability retirement benefits for up to 5 years while they wait for their disabling medical conditions to stabilize. Once a permanent disability rating can be assigned, depending on the rating and the servicemember's years of military service, the PEB may place those on the TDRL on the

¹See GAO, *Military Disability System: Improved Oversight Needed to Ensure Consistent and Timely Outcomes for Reserve and Active Duty Service Members*, [GAO-06-362](#) (Washington, D.C.: Mar. 31, 2006); and *Military Disability System: Increased Supports for Servicemembers and Better Pilot Planning Could Improve the Disability Evaluation Process*, [GAO-08-1137](#) (Washington, D.C.: Sep. 24, 2008).

Permanent Disability Retired List (PDRL), grant them a one-time severance payment, or find them fit to return to military service.²

Questions have been raised about the TDRL process, including whether it is administered appropriately and consistently across all services, whether the military provides adequate support and guidance to servicemembers who are placed on the list, and whether individuals may be staying on the list longer than necessary. To better understand the TDRL process and the issues surrounding it, this report provides information on (1) recent trends in the TDRL caseload size, (2) recent trends in the characteristics of servicemembers placed on the TDRL, (3) disability retirement outcomes for TDRL placements, (4) the adequacy of TDRL management, and (5) the adequacy of information provided to temporary retirees.

To determine trends in TDRL caseload size, we analyzed data from DOD's Defense Manpower Data Center Retired Pay File and administrative data maintained by PEBs in the Air Force, Army, and Navy. Data from these files were also used to determine the characteristics and TDRL outcomes of all those placed on the list each calendar year from 2000 through 2007. We also reviewed and discussed with DOD officials the results of their own recently issued study of the TDRL, which also examined TDRL retirees' characteristics and outcomes.³ Based on information we obtained from the military about how the data in these files were collected and what measures were taken to assure their quality, we determined that these data were adequately reliable for the purposes of this study. To assess the adequacy of TDRL management, we reviewed relevant laws, regulations, and procedures. In addition, we interviewed military officials who are responsible for implementing these requirements across the services, including PEB members, Medical Command representatives, and PEB Liaison Officers (PEBLO) from military medical treatment facilities across the services—specifically, at three Air Force, four Army, and three Navy facilities. We assessed the adequacy of existing TDRL procedures relative to internal control standards for the federal government and the requirements of the Government Performance and Results Act of 1993. To

²Servicemembers on the TDRL may be separated without compensation in rare cases involving noncompensable medical conditions that are diagnosed after they have been placed on the list.

³DOD, Office of the Under Secretary of Defense (Personnel and Readiness), *Report to Congress, The Temporary Disability Retired List (TDRL): An Assessment of its Continuing Utility and Future Role* (Washington, D.C., Oct. 2, 2008).

assess the adequacy of information provided to servicemembers who are placed on the TDRL, we also reviewed each service's PEB decision forms and other written materials, as well as information available on the services' Web sites. We also obtained the experiences and views of TDRL retirees across the services by conducting a series of 12 focus groups in June and August 2008 with individuals who were on the TDRL. Focus groups were conducted in Norfolk, Va., Quantico, Va., San Antonio, Tex., and Killeen, Tex., because collectively, these areas provided us with access to a large pool of temporary retirees from each of the services.

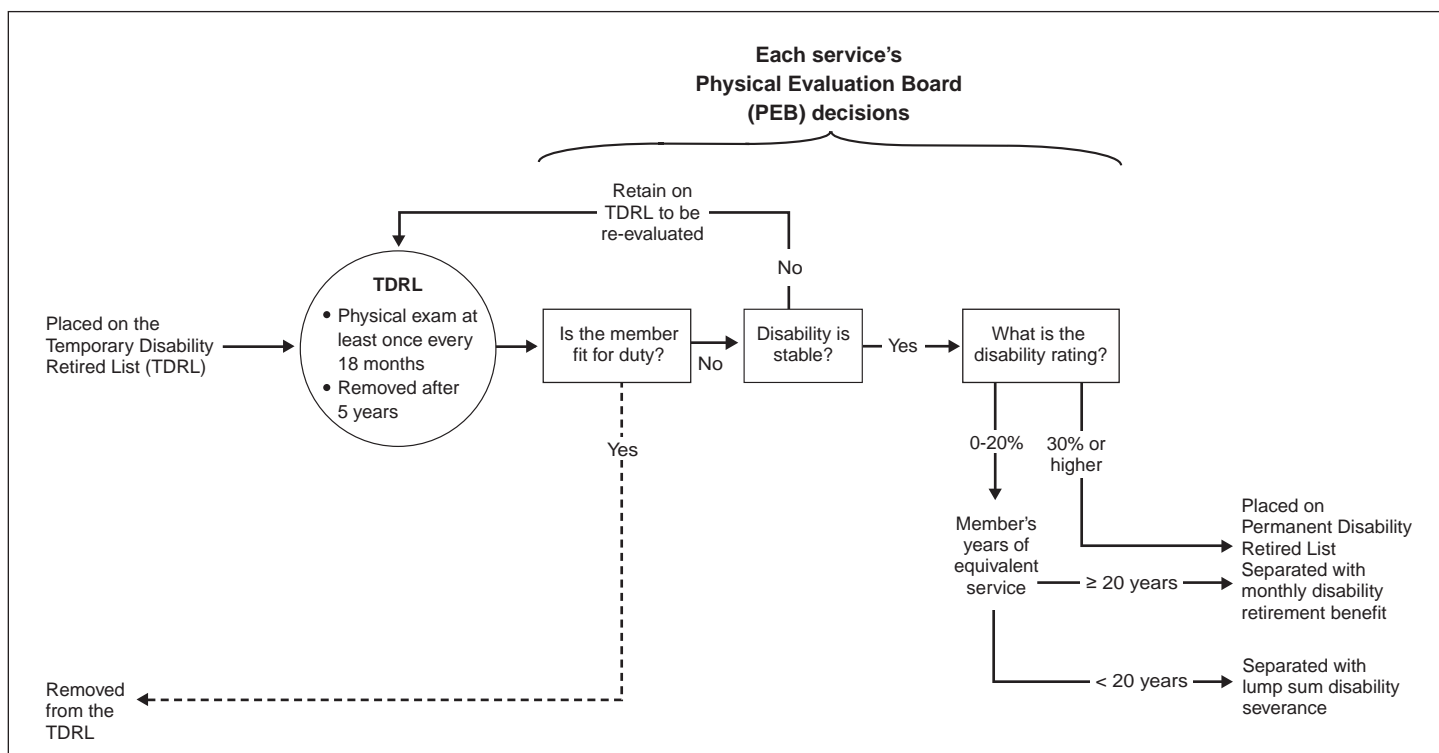
We conducted this review from March 2008 to April 2009 in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives. Additional information about our objectives, scope, and methodology is provided in appendix I.

Background

The TDRL was established under the Career Compensation Act of 1949 to allow for temporary disability retirement pay and benefits for any servicemember who would be eligible for disability retirement benefits, were it not for the fact that their disability was not of a permanent nature. In 1986, the law was amended to allow the military to place individuals on the TDRL if it is determined that their disabilities could be of a permanent nature but are not stable enough to rate their severity. Under this criterion, a disability is considered not stable if the medical evidence indicates its severity will probably change enough sometime within the next 5 years to warrant an increase or decrease in the disability percentage rating. For example, cancer is a condition that may be determined to be permanent and stable when the disease has progressed to the point where treatments are unlikely to cure it, or determined to be permanent and unstable when the disease is being treated and the prognosis remains uncertain.

Consistent with how the military administers its overall disability evaluation system, DOD gives each service responsibility for administering its own TDRL process. DOD provides some guidance for administering the TDRL, but gives the services broad latitude. Therefore, each service has established more detailed guidance for its own day-to-day processes related to the TDRL. The services have their own staff, or TDRL units, that oversee and process TDRL cases. Figure 1 depicts the TDRL decision process in detail.

Figure 1: Final Disability Determination Process for TDRL Cases



Source: GAO analysis.

To qualify for permanent disability retirement benefits, or placement on the Permanent Disability Retired List (PDRL), a servicemember must have a service-related medical condition that renders him or her unfit for duty. The condition must be compensable,⁴ and the severity of the condition, expressed as a percentage rating, must be 30 percent or higher.⁵ Typically, the percentage disability rating dictates the amount of monthly disability

⁴Generally, a condition is compensable if the disability is of a permanent nature and stable, is not the result of misconduct or willful neglect, was incurred in the line of duty, and the servicemember is entitled to basic pay or has an authorized absence.

⁵Servicemembers must be referred to the disability evaluation system for a determination of whether they are fit for duty by their service command. This referral is made after other options for retaining the servicemember, including reassignment in a limited duty capacity, have been exhausted. Servicemembers with 20 or more years of service are not subject to the 30 percent minimum rating.

retirement payments to which a servicemember is permanently entitled.⁶ If, based on the medical evidence, the PEB determines that a servicemember's disabling condition is unstable—that the condition's current percentage rating could change within the next 5 years—the PEB will place the servicemember on the TDRL.⁷ In effect, placement on the TDRL postpones a final determination of the percentage rating and the associated monthly disability payments to which the retiree may eventually and permanently be entitled.

Once placed on the TDRL, temporary retirees must undergo periodic medical reexaminations and evaluations by a PEB at least once every 18 months. Under the law, assignment to the TDRL must end with a final determination at the end of 5 years, or sooner if the results of a medical reexamination indicate that the temporary retiree's condition is of a permanent nature and stable or the servicemember's rating drops below 30 percent. Typically, temporary retirees receive medical reexaminations in conjunction with PEB determinations. These examinations are usually conducted at military treatment facilities (MTF). Each service's TDRL administrative unit is responsible for determining when temporary retirees are due for medical reexaminations, notifying them of upcoming medical reexaminations and arranging for the examinations at MTFs, and following up with temporary retirees who fail to keep appointments. Temporary retirees are required to make sure the appropriate service's TDRL unit has their current address. Temporary retirees are also required to report for medical reexaminations at appointed times and places. Typically, reexaminations are scheduled by the relevant service's MTF that is nearest to the TDRL retiree's place of residence. If a temporary retiree is unable to keep an appointment, he or she is required to make alternate arrangements to complete the medical reexamination. If temporary retirees refuse or fail to report for required reexaminations, the services have the authority to terminate their temporary disability retirement pay.

The benefits that servicemembers are entitled to while on the TDRL are similar to those for servicemembers who are placed on the PDRL. In most

⁶Eligible servicemembers may choose to receive retirement payments based on years of service instead, if this would result in higher payments.

⁷An exception is made when the servicemember has an unstable condition rated at 80 percent or higher and the condition is not expected to improve enough to lower their rating to less than 80 percent. In this case, the servicemember would be placed on permanent disability retirement.

cases, the amount of TDRL monthly payments are calculated in the same way as PDRL monthly cash payments: retirees with fewer than 20 years of service receive their base pay at retirement, multiplied by the assigned percentage rating for their disabling medical conditions;⁸ servicemembers with 20 or more years of service receive the higher of either their base pay at retirement, multiplied by either their assigned percentage rating, or 2.5 times their years of service—whichever is higher. Regardless of years of service, temporary retirees with a disability percentage rating of 50 percent or less are entitled to no less than 50 percent of their base pay at retirement. Both TDRL and PDRL monthly cash payments are subject to a cap of 75 percent of servicemembers' base pay and are subject to income taxes.⁹ In addition to receiving cash payments, temporary retirees are entitled to other military retirement benefits, including health insurance coverage for themselves, their spouses, and eligible dependents, and access to discounted goods and services through military exchange facilities. Finally, temporary retirees are also eligible to apply for VA disability compensation, which is not subject to income taxes. The military benefits of both permanent and temporary retirees are reduced, however, by the amount of VA benefits they receive.¹⁰

Evolving Purpose of the TDRL

While the Career Compensation Act of 1949 does not cite a specific purpose for the TDRL or state a rationale for the eligibility threshold of 30 percent, a 1948 report of the Advisory Commission on Service Pay (the Hook Commission), upon which much of the act was based, suggests that the TDRL may have been established as a means of “minimizing the loss of trained, experienced service members who, given additional time, might recover sufficiently to return to” the military.¹¹ Meanwhile, a recently issued report by DOD suggests that the purpose of the TDRL has also evolved into a vehicle to safeguard the interests of servicemembers whose

⁸Eligible servicemembers may choose to receive retirement payments based on years of service instead, if this would result in higher payments.

⁹Benefits may be nontaxable if the service's PEB determines that the compensable injuries are combat-related.

¹⁰This offset is being progressively eliminated for military retirees with at least 20 years of service who have a VA disability rating of 50 percent or greater.

¹¹The Hook Commission had recommended that the first 5 years of all disability retirements be subject to periodic physical examinations through age 60, which would have been in keeping with the Army's efforts to institute a system that would allow for adjusting the amount of retirement pay based on changes in the degree of disability over time.

conditions may develop into more serious permanent disabilities.¹² The report also notes that other means might be used to accomplish the current purposes of the TDRL and suggests that changes may be warranted, including reducing the maximum tenure on the TDRL and establishing standardized guidance for classifying impairments as “permanent and stable.”

TDRL Caseloads Have Grown for a Combination of Reasons

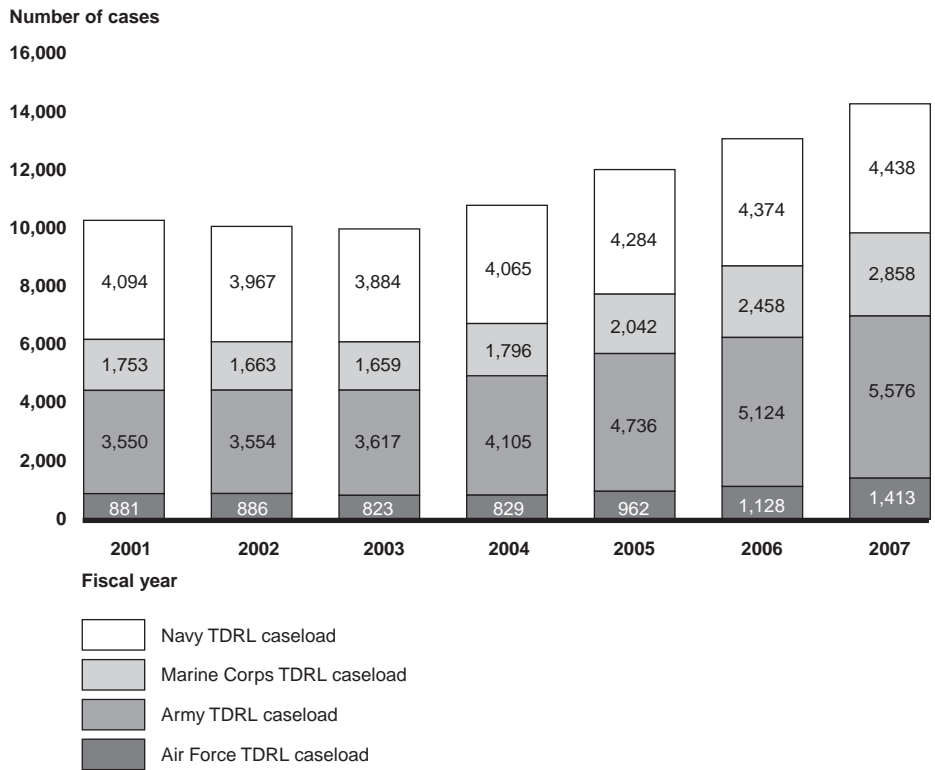
TDRL caseloads grew DOD-wide by 43 percent from fiscal years 2003 through 2007. Growth in TDRL caseloads could be related to a combination of increases in the number of cases going through the military’s disability evaluation system, higher TDRL placement rates, and low numbers of cases removed from the TDRL relative to numbers of new cases being added to the list.

TDRL Caseloads Grew from Fiscal Years 2003 through 2007

While DOD-wide TDRL caseload size declined slightly from fiscal years 2001 through 2003, it grew steadily from 9,983 cases in 2003, to 14,285 cases in 2007, an increase of 43 percent. (See fig. 2.) Air Force and Marine Corps caseloads had the highest rate of growth during this time (72 percent each), and the Army’s caseload grew by 54 percent. The Navy’s also grew during this time, but only by 14 percent.

¹²DOD, Office of the Under Secretary of Defense (Personnel and Readiness), *The TDRL: An Assessment of its Continuing Utility and Future Role*.

Figure 2: TDRL Caseloads, by Service, Fiscal Years 2001 to 2007



Source: Defense Manpower Data Center Retired Pay File.

Caseload Growth Has Been Related to Increases in New Disability Cases, Higher TDRL Placement Rates, and Relatively Few Removals from the List

A combination of factors contributed to the growth in TDRL caseloads between fiscal years 2003 and 2007.¹³ TDRL caseloads grew along with an increase in cases going through the disability evaluation system as a result of Operations Enduring Freedom and Iraqi Freedom. The number of disability evaluation system cases DOD-wide grew from about 16,500 in 2003, to about 20,000 in 2007, an increase of 21 percent. (See app. II, table 7.) Each service also experienced an overall growth in disability evaluation system cases during this period. (See app. II, table 8.)

Higher TDRL placement rates—the number of placements on the TDRL in a given year relative to the number of all cases receiving a disability

¹³We did not test for statistical associations between these factors and the growth in TDRL caseload.

determination that same year—also contributed to the growth in TDRL caseloads.¹⁴ (See table 1.)

Table 1: TDRL Placement Rates, by Service, Fiscal Years 2003 through 2007

Service	Fiscal year				
	2003	2004	2005	2006	2007
Air Force	7%	7%	10%	10%	15%
Army	15	14	14	15	18
Marine Corps	19	23	28	34	38
Navy	27	24	27	30	31
DOD-wide total	15%	16%	16%	18%	21%

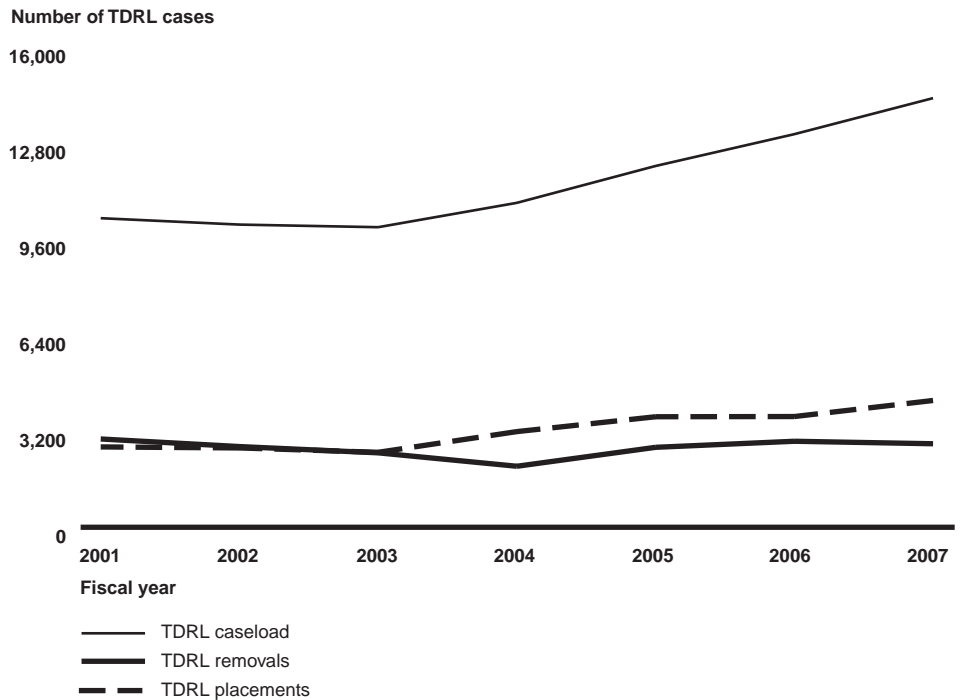
Source: GAO analysis of PEB data from each service.

The increase in TDRL placement rates was most significant for the Air Force and the Marine Corps. Marine Corps and Navy placement rates were also consistently much higher than rates in the other services.

Finally, the growth in the TDRL caseload DOD-wide may also be due, in part, to the relatively low numbers of cases removed from the TDRL, compared with the numbers of new cases added to the list each year. (See fig. 3.) In fiscal year 2003, there were 18 more cases placed on the TDRL than were removed from the TDRL that year. By 2007, this difference grew to 1,442 more cases placed on than removed from the TDRL. Within each service, the difference between the numbers of cases added to and removed from the TDRL varied over time. (See app. II, tables 9 and 10.)

¹⁴Placement on the TDRL is one of several disability evaluation outcomes. The other potential outcomes are placement on the PDRL, separation with or without a one-time severance payment, and being found fit to return to military service.

Figure 3: Total DOD-Wide TDRL Caseloads and Numbers of Cases Added to and Removed from the TDRL, Fiscal Years 2001 through 2007



Sources: PEB data from each service and the Defense Manpower Data Center Retired Pay File.

The Characteristics of TDRL Placements Have Changed Somewhat in Recent Years

DOD-wide, servicemembers placed on the TDRL in each calendar year from 2000 through 2007 varied little with respect to their military status, years of service, and most prevalent disabling conditions. In each of these years, most TDRL placements had been active duty personnel, although the small proportion who had been reservists grew considerably between 2000 and 2007. Most TDRL placements in each year also had fewer than 20 years of service and, over time, their average years of service declined, DOD-wide. The disabilities most prevalent among TDRL placements have consistently been musculoskeletal, mental, or neurological in nature. Among those with mental and neurological disabilities, the incidence of Post Traumatic Stress Disorder (PTSD) and residual conditions related to traumatic brain injury (TBI) increased substantially across all of the services.

Most TDRL Placements Have Been Active Duty Personnel, though the Proportion Who Were Reservists Grew Significantly

Eighty-four percent of all servicemembers placed on the TDRL in calendar years 2000 through 2007 were active duty military. The percent of TDRL placements who were reservists grew DOD-wide, from about 8 percent in 2000, to about 21 percent in 2006. (See app. II, table 11.) This overall increase appears to have been driven primarily by the Army, where the proportion of reservists among TDRL placements nearly tripled from 12 percent in 2000, to 35 percent in 2006.

Although the majority of servicemembers placed on the TDRL have been active duty military, the overall number of reservists placed on the TDRL, though small, has generally been increasing over time. This increase is consistent with the activation of reservists needed for military operations in Afghanistan and Iraq, which in turn, added to the number of reservists who entered the disability evaluation system during this time.¹⁵ (See app. II, table 12.)

Most TDRL Placements Have Had Fewer Than 20 Years of Service, and Their Average Years of Service Has Declined

DOD-wide, the vast majority of TDRL placements have had fewer than 20 years of service. This has changed little over time. Across the services, this proportion ranged from 91 percent for the Navy and Air Force, to 99 percent for the Marine Corps. (See table 2.)

Table 2: Proportion of Annual TDRL Placements with Less Than 20 Years of Service, Calendar Years 2000 through 2007

Service	Calendar year							
	2000	2001	2002	2003	2004	2005	2006	2007
Air Force	94%	94%	91%	95%	94%	95%	97%	96%
Army	96	96	95	95	96	97	97	98
Marine Corps	94	95	97	96	97	98	99	99
Navy	91	94	91	93	95	95	96	95
DOD-wide total	94%	95%	94%	94%	96%	96%	97%	97%

Source: GAO analysis of data from the Defense Manpower Data Center Retired Pay File.

Additionally, the average years of service decreased from 8 years among TDRL placements in calendar year 2000, to 6 years for placements in 2007. (See app. II, table 13.) In each service, the average decreased by 1 or 2

¹⁵For a more detailed discussion of the numbers of reservists referred to the disability evaluation system relative to active duty servicemembers, see [GAO-06-362](#).

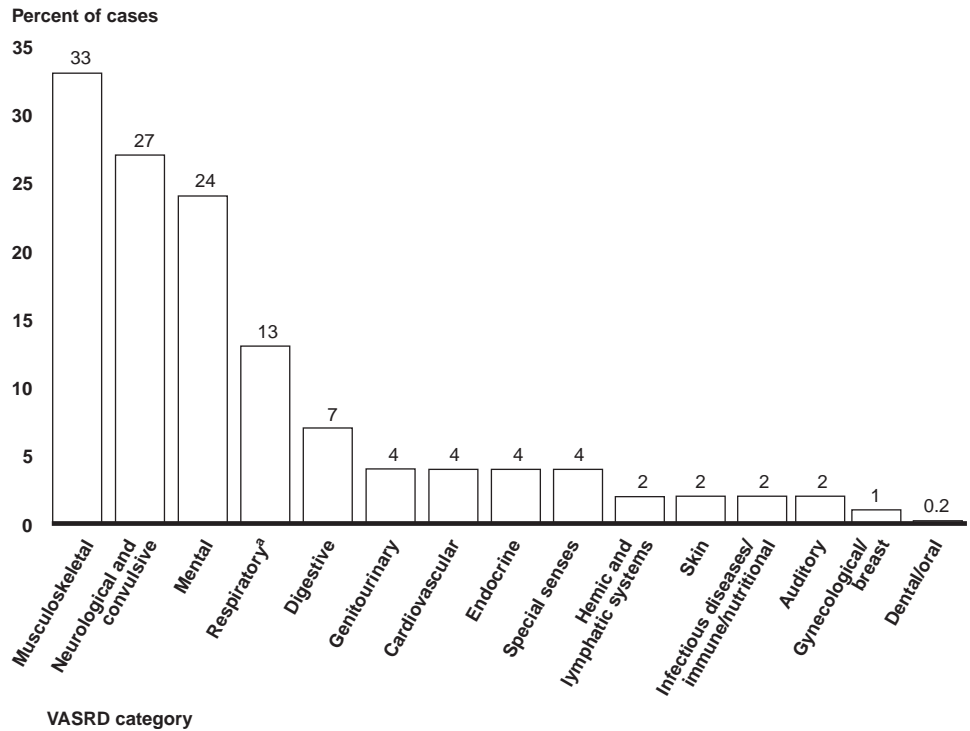
years. The overall decline among TDRL placements who had been Marine Corps reservists was particularly pronounced. Their average years of service decreased from 13 in 2000, to 4 in 2007. (See app. II, table 14.) The decline in average years of service is likely associated, at least in part, with the increasing numbers of reservists on the TDRL, who typically take longer to accumulate years of service than active duty servicemembers.

There Has Been Little Change in the Prevalence of Certain Types of Disabling Conditions

Between calendar years 2000 and 2007, there has been little change in the types of disabling conditions most common among servicemembers placed on the TDRL each year. Over this period, the most prevalent disabilities, DOD-wide, have largely fallen into 1 of 3 out of 15 possible disability categories in the Department of Veterans Affairs Schedule for Rating Disabilities (VASRD): (1) the musculoskeletal system, (2) mental disorders, and (3) neurological conditions and convulsive disorders.¹⁶ (See fig. 4.)

¹⁶Disabling conditions the VASRD classifies as respiratory disorders were also relatively more prevalent among annual placements on the Army's TDRL. The prevalence of respiratory disorders, in general, has declined from 30 percent among Army TDRL placements in 2000 to 12 percent in 2007.

Figure 4: Prevalence of Types of Disabling Conditions among Servicemembers, DOD-wide, Placed on the TDRL in Calendar Years 2000 through 2007



Source: GAO analysis of PEB data from each service.

Note: Each TDRL retiree may have more than one disabling condition.

^aAsthma accounted for the largest proportion of respiratory disorders among annual DOD-wide TDRL placements in calendar years 2000 through 2007.

For DOD-wide placements in each calendar year from 2000 through 2007, the most common musculoskeletal disabling condition was degenerative arthritis, accounting for 24 percent of all musculoskeletal disabilities. Many of the other disabling conditions in this category were unspecified, although the combination of various types of spinal injuries accounted for about an additional 30 percent of musculoskeletal disabilities.

The most common neurological conditions and convulsive disorders among TDRL placements were migraines and residuals of TBI,¹⁷ each

¹⁷Until October 23, 2008, “Residuals of Traumatic Brain Injury (TBI)” in the VASRD was referred to as “Brain Disease Due to Trauma.”

accounting for 16 percent of all types of disabilities within this category.¹⁸ In recent years, the DOD-wide number of TDRL placements due to a residual condition from TBI¹⁹ has increased fourfold, DOD-wide, from 63 in 2000, to 274 in 2007. (See app. II, table 15.) The incidence of residuals of TBI, as a percentage of all neurological conditions and convulsive disorders among TDRL placements grew from 10 percent in 2000, to 21 percent in 2007. (See app. II, table 16.) The Army experienced the greatest increase in TBI residuals cases—from 9 percent, to 26 percent—as the proportion of all neurological conditions and convulsive disorders among TDRL placements.

The most common mental disorder among TDRL placements in calendar years 2000 through 2007 was PTSD, which accounted for 26 percent of all mental disorders.²⁰ The number of TDRL placements with PTSD increased dramatically, DOD-wide, from 44 in 2000, to 672 in 2007. (See app. II, table 17.) PTSD incidence, as a percentage of all mental disorders among TDRL placements, also grew, DOD-wide, from 8 percent in 2000, to 43 percent in 2007. (See app. II, table 18.) The Marine Corps experienced the greatest increase—from 6 percent, to 52 percent.

According to some DOD officials, the increase in TBI residuals and PTSD among TDRL placements may be due to the increasing numbers of servicemembers returning from military operations in Afghanistan and Iraq with these conditions. The increased incidence of these disabling conditions among TDRL placements could also be attributed to growing acceptance of PTSD as a disabling condition and more concerted efforts to identify residuals of TBI.²¹

¹⁸Other common neurological conditions and convulsive disorders included epilepsies (12 percent), sciatic nerve (11 percent), and multiple sclerosis (8 percent).

¹⁹A TBI in and of itself is not considered a disability based on the VASRD. There are three main areas of residual dysfunction that may result from a TBI and have profound effects on functioning: cognitive, emotional/behavioral, and physical.

²⁰Other common mental disabilities include major depressive disorders (23 percent), bipolar disorder (15 percent), and dementia due to head trauma (14 percent).

²¹For servicemembers with PTSD, starting in 2008, the VASRD applies an automatic disability rating of not less than 50 percent, but requires that a follow-up examination be scheduled within a 6-month period, instead of every 18 months.

Very Few TDRL Placements Returned to Military Service, Half Received a Final Determination within 3 Years, and Many Received a Final Disability Rating Identical to the Initial Rating

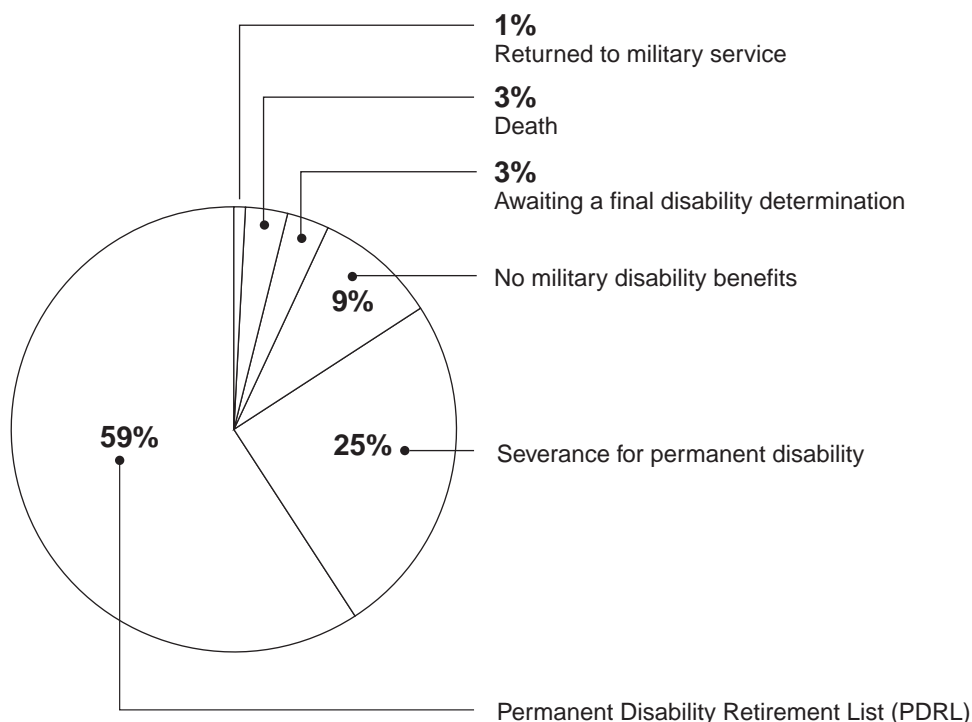
While there are variations in TDRL results across the services, some outcomes for this group were more common than others. Specifically, very few TDRL placements between calendar years 2000 and 2003 returned to military service. Further, about half received a final determination within 3 years or less. Finally, only 7 percent of TDRL placements, DOD-wide, received a final disability rating that would have resulted in permanent disability payment amounts higher than their TDRL payments.

Very Few TDRL Placements Returned to Military Service

DOD-wide, only 1 percent of those placed on the TDRL in calendar years 2000 through 2003 eventually returned to military service. More than 80 percent were determined to be permanently disabled. Of these, 5,465 were placed on the PDRL. The remaining 2,315 received a lump sum severance payment for their disability because their final rating was lower than 30 percent and they had fewer than 20 years of military service.²² Another 9 percent of these placements received no military disability benefits after they were removed from the TDRL. (See fig. 5.)

²²For 31 individuals who were placed on the TDRL between calendar years 2000 and 2003 and then removed from the list, it was unknown if a severance payment was made.

Figure 5: Status of Calendar Years 2000 through 2003 TDRL Placements, as of August 2008



Source: GAO analysis of Defense Manpower Data Center Retired Pay File.

It should be noted that of all those placed on the PDRL, nearly 10 percent (1,004) did not receive a final disability determination until some time after they were removed from the TDRL. As a result, they experienced a gap in benefits that, in 18 percent (176) of these cases, lasted longer than 6 months.²³

Each service's distribution of outcomes for those placed on the TDRL in calendar years 2000 through 2003 differed somewhat from the distribution DOD-wide. (See app. II, table 19.) Specifically, the Marine Corps and Air Force returned about 4 percent of temporary retirees to military service,

²³The law states that "the Secretary concerned shall make a final determination of the case of each member whose name is on the temporary disability retired list upon the expiration of five years after the date when the member's name was placed on that list. If, at the time of that determination, the physical disability for which the member's name was carried on the temporary disability retired list still exists, it shall be considered to be of a permanent nature and stable." 10 U.S.C. § 1210(b).

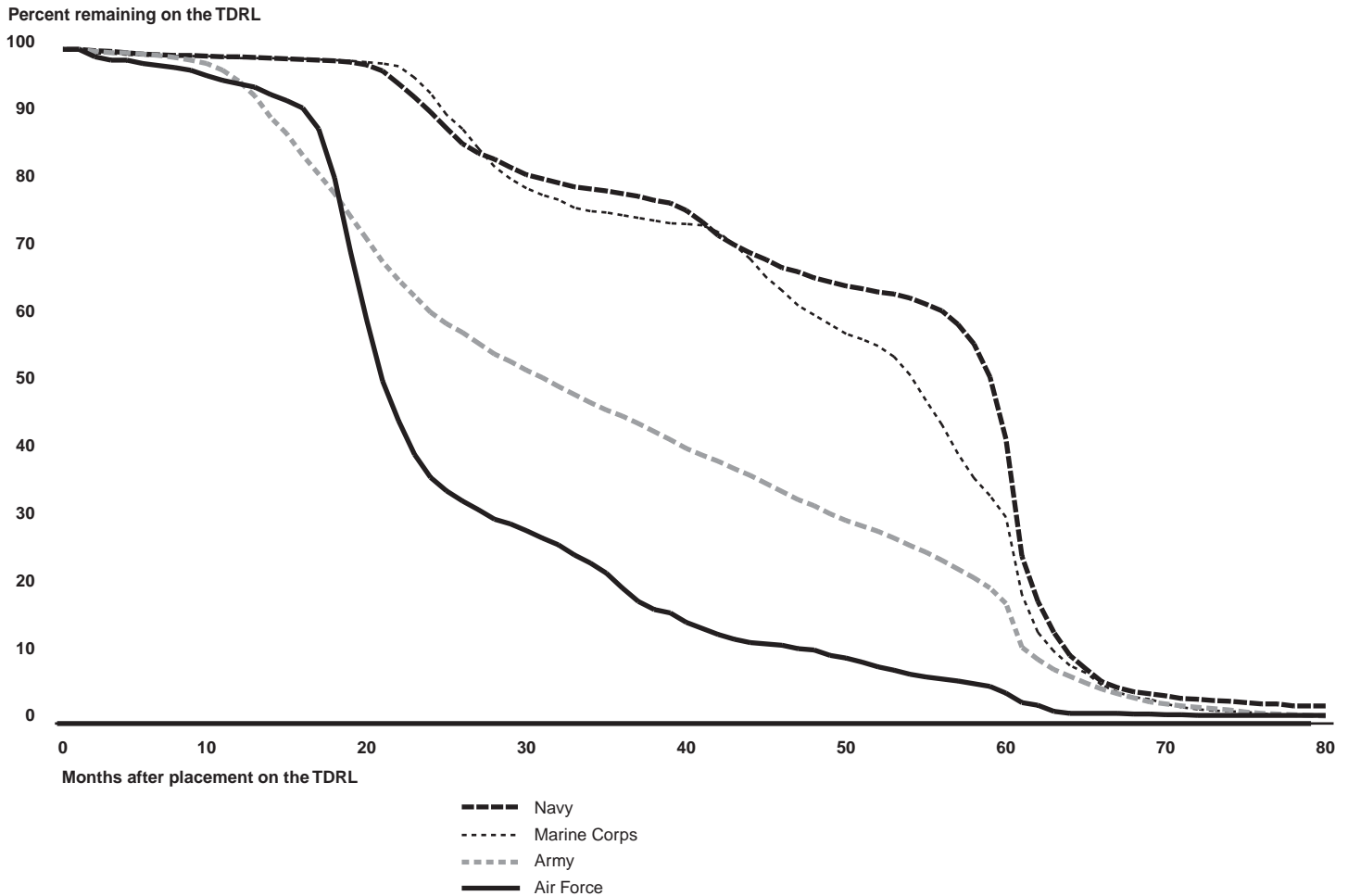
while the Army and Navy returned less than one half of one percent of their respective TDRL retirees to active duty.

About Half Received a Final Determination within 3 Years

About half (46 percent) of all those placed on the TDRL, DOD-wide, in calendar years 2000 through 2003 received a final determination on their case within 3 years.²⁴ (See app. II, table 20.) The amount of time spent waiting for a final determination varied by type of determination and by service. We found that, DOD-wide, final determinations placing temporary retirees on the PDRL happened somewhat sooner (median time, 56 months) than final determinations returning temporary retirees to civilian status with either no military disability benefits or with severance for a disability (median time, 60 months). We also found that TDRL placements from the Air Force tended to receive final determinations in fewer months than TDRL placements from other services. (See fig. 6.) For example, by 36 months after placement on the list, the percent of temporary retirees from the Air Force, Army, Marine Corps, and Navy who had received their final determination and were removed from the list were 83 percent, 57 percent, 25 percent, and 22 percent, respectively.

²⁴Among those starting on the TDRL in calendar years 2004 to 2007, 50 percent have already received a final disposition of PDRL by month 48, which is earlier than the median of 56 months for those placed on the list in 2000 through 2003.

Figure 6: Number of Months until Final Disability Determination for Each Service's TDRL Placements, Calendar Years 2000 through 2003



Source: GAO analysis of data from the Defense Manpower Data Center Retired Pay File.

The law provides that a temporary retiree can spend no more than 5 years on the TDRL and must receive a final determination upon the expiration of 5 years, in cases where the individual remains on the list for the full 5 years. However, we found that about 12 percent of TDRL placements in calendar years 2000 to 2003—1,163 cases—did not receive a final determination within the 5 years, although they were removed from the TDRL and their temporary retirement payments were discontinued. While most of these individuals—735—were eventually placed on the PDRL, none received monthly disability retirement payments between the time they were removed from the TDRL and the time they were placed on the

PDRL. The amount of time that individuals spent waiting for a final determination in some cases was significant. For example, of the 1,004 cases that were first removed from the TDRL and then subsequently placed on the PDRL, there were 176 (18 percent) who waited longer than 6 months between being removed from the TDRL to being placed on the PDRL, and very few received any military disability payments during this period.²⁵

When asked about these cases, DOD officials reported that extra time is needed to reach a final determination in some cases. For example, if TDRL placements who have been on the list nearly 5 years are having trouble scheduling a medical reexamination for their final determination, it may take an extra month or two before a final determination can be made. Also, DOD officials stated that they need the flexibility to allow some to remain on the TDRL more than 5 years because their disabilities are still not stable to rate at 5 years. Nevertheless, as stated earlier, a final determination must be made upon the expiration of 5 years on the TDRL, at which time disability is considered to be permanent and stable by statute.

Final Disability Ratings for More Than Half Were Identical to Initial Ratings

Final disability ratings for temporary retirees determine whether retirees are ultimately eligible for a disability severance payment or permanent disability retirement. Final disability ratings also help determine the amount of permanent monthly payments TDRL placements are eligible for.²⁶ DOD-wide, for those placed on the TDRL in calendar years 2000 through 2003 who were ultimately placed on the PDRL, 73 percent were assigned a final disability rating that was no different from their initial disability rating.²⁷ (See app. II, tables 21 and 22.) In other words, in these cases, the severity of disabilities when placed on the TDRL was no different from their severity when removed from it. Because one would expect to find a difference between the initial and final ratings when disabilities are determined to be unstable, the appropriateness of the

²⁵Three individuals who were first removed from the TDRL and subsequently placed on the PDRL received severance payments.

²⁶Eligible servicemembers may choose to receive retirement payments based on years of service instead, if this would result in higher payments.

²⁷We were not able to calculate a difference in ratings for 10 of the temporary retirees that were placed on the PDRL because data on their final ratings were missing.

TDRL placement decision in cases where initial and final ratings are identical could be called into question.

Another 14 percent of those ultimately placed on the PDRL received a final rating that was lower than their initial one, indicating that their disabilities were less severe when they left the TDRL than when they were placed on it. Finally, 13 percent received a final rating that was higher, indicating that their disabilities were more severe when they left the TDRL. The differences between initial and final disability ratings for temporary retirees in each of the service branches who were placed on the PDRL were generally similar to the differences among these temporary retirees DOD-wide.

Relatively Few Ultimately Qualified for PDRL Payments Higher Than Their TDRL Payments

According to military officials, being on the TDRL provides additional time for the military services to determine an individual's final disability rating, which could result in more accurate payments. Although we could not determine whether differences in initial and final ratings resulted in more accurate payments, we estimated that for the 5,465 TDRL placements that were placed on the PDRL, 7 percent would have received higher monthly disability retirement payments, 20 percent would have received the same disability payments, and 73 percent would have received lower payments, based on their final ratings. Lower permanent disability retirement payments were either due to a decrease in the disability rating or to the fact that PDRL payments are not subject to the TDRL minimum payment provision.²⁸ For example, a temporary retiree with an initial rating of 40 percent who is moved to the PDRL with a final rating of 40 percent would receive PDRL payments lower than their TDRL payments.

Of the 3,190 TDRL placements that were ultimately determined not to be eligible for permanent disability payments, 73 percent received a disability severance payment,²⁹ and 26 percent had their disability benefits terminated when they were removed from the TDRL.

²⁸Monthly cash payments for temporary retirees can be no lower than 50 percent of the individual's base pay at the time of retirement.

²⁹These were cases where the individual had less than 20 years of service and received a final rating below 30 percent.

DOD and the Services Do Not Provide Sufficient Management Attention to Key Aspects of the TDRL Process

DOD and the services do not effectively manage key aspects of the TDRL process. While TDRL determinations vary considerably across the services, neither DOD nor the services systematically examine PEB stability decisions for accuracy and consistency, although these decisions determine whether servicemembers are placed or retained on the TDRL. They also do not routinely compile information on TDRL outcomes that could better inform PEB determinations related to the stability of disabilities. Despite indications that the services face challenges providing medical reexaminations at least once every 18 months as required by law, none monitor the extent to which this requirement is met. Moreover, although TDRL reexamination requirements can place burdens on TDRL retirees and MTFs, the use of examinations by nonmilitary physicians to reduce these burdens is limited. Finally, the services lack procedures to ensure consistent enforcement of TDRL rules.

TDRL Placement and Retention Decisions Are Not Systematically Analyzed for Accuracy and Consistency

One of the primary goals of any disability evaluation system is making accurate and consistent disability determinations. In order to meet this goal, there should be appropriate policies, procedures, and control mechanisms in place to ensure that no one is placed or retained on the TDRL who does not meet the criteria established by law. Such policies, procedures, and control mechanisms are an important part of an effective system of internal controls.

The accuracy and consistency of decisions to place servicemembers on the TDRL are particularly important because of the significant impact these decisions have on the military and on servicemembers' lives. According to military officials, placing servicemembers on the TDRL provides an opportunity for the military to recover some of its investment in recruitment and training by returning servicemembers to duty, and provides more time to make an appropriate disability determination in cases where a condition is likely to improve or deteriorate. Despite these potential benefits, many military officials noted that the TDRL is administratively burdensome and contributes to the workload of an already overburdened disability evaluation system. For servicemembers, benefits of being on the TDRL may include potentially higher disability payments or returning to military service. Conversely, many focus group participants said that being on the TDRL limited their ability to move forward in their lives, and they expressed confusion, uncertainty, and a sense of being adrift while on the TDRL.

To ensure uniformity in military disability case processing and decision making, DOD requires each service to establish a quality assurance

process. However, decisions related to the stability of disabilities for rating purposes—a key criterion for initially placing servicemembers on the TDRL—are not systematically examined within or across the services. For their part, the services do review some individual cases to ensure that the medical evidence supports the determination.³⁰ However, they do not compare TDRL determinations made in cases with similar disabilities and other characteristics.³¹

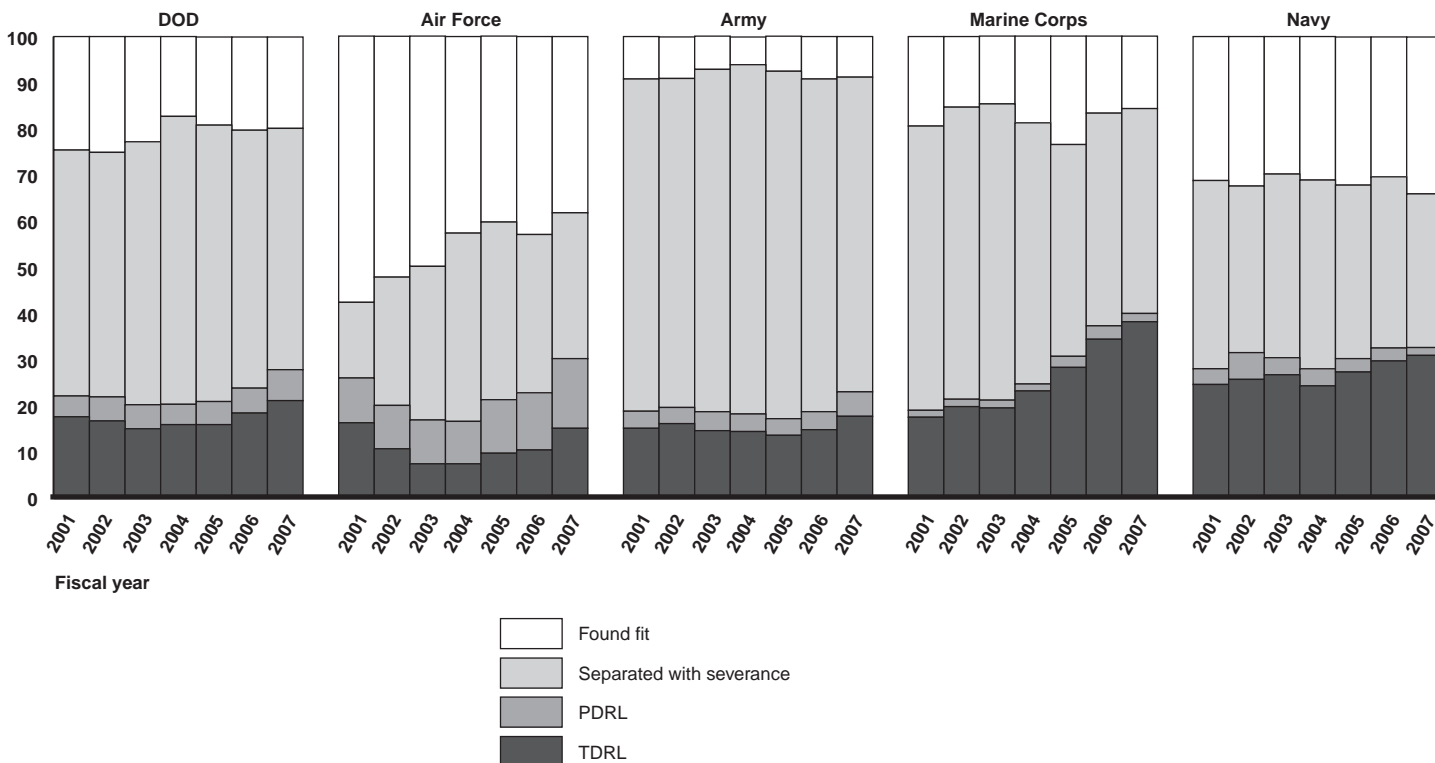
Military officials we spoke with acknowledged that instability is defined broadly and can be open to different interpretations by the PEBs. Specifically, some military officials said that predicting whether or not a disability rating may fluctuate within 5 years is not always easy and can involve considerable professional judgment. In fact, our analysis shows that some services have been classifying disabilities as “unstable” more often than other services. TDRL determinations have consistently accounted for a larger proportion of all PEB determinations in the Navy and Marine Corps than in the other services. (See fig. 7.) Specifically, between fiscal years 2001 and 2007, TDRL determinations constituted 27 percent of all Navy PEB determinations and 26 percent of all Marine Corps PEB determinations. In contrast, TDRL determinations accounted for 15 percent of all Army PEB determinations and 11 percent of all Air Force PEB determinations.

³⁰DOD policies require that servicemembers’ case files undergo review by multiple reviewers, and federal law requires that the services use, to the extent feasible, the VASRD. In addition, DOD periodically convenes a Disability Advisory Council comprised of service officials to review and update disability policy and to discuss current issues. For more information, see [GAO-06-362](#). Among the services, only the Army conducts post disposition quality reviews to determine whether the medical evidence supports the disposition decision made in each case.

³¹The Army has implemented a statistical program that analyzes its disability system database and identifies the VASRD codes that have the greatest degree of face inconsistency among its three PEBs.

Figure 7: Use of TDRL Determinations Relative to Other Types of Military Disability Determinations, by Service, Fiscal Years 2001 through 2007

Percent of all PEB decisions per branch of service



Source: GAO analysis of PEB data from each service.

Note: See appendix II, table 8 for numbers of placements by service.

Another possible explanation for why some services classify disabilities as unstable more often than other services, according to DOD officials, is that there may be greater incidence of disabilities in some services that are more likely to be unstable. Currently there are no data available from either DOD or the services that could be used to determine why placement rates vary. Further, DOD does not compare PEB instability decisions across the services. As a result, DOD and the services have no way of knowing the extent to which the military is making consistent decisions.

Furthermore, although most TDRL disability ratings did not change even after several years on the list, DOD and the services do not routinely compile and study how TDRL outcomes are related to different types of disabilities, even though this information could help inform future TDRL

placement and retention decisions.³² For example, such information could shed additional light on which conditions are more likely to change over time and which ones are not. Meanwhile, participants in our focus groups often questioned the appropriateness of their placement on the TDRL, and the perceived unfairness of TDRL placement and retention decisions was a theme that emerged in each of our focus groups. Some of the military physicians we spoke with also questioned the value of having placed individuals with certain conditions, such as certain types of cancer, on the TDRL. For example, we were told that in one case, a cancer patient whose cancer had metastasized was placed on the list, even though he was not expected to recover.

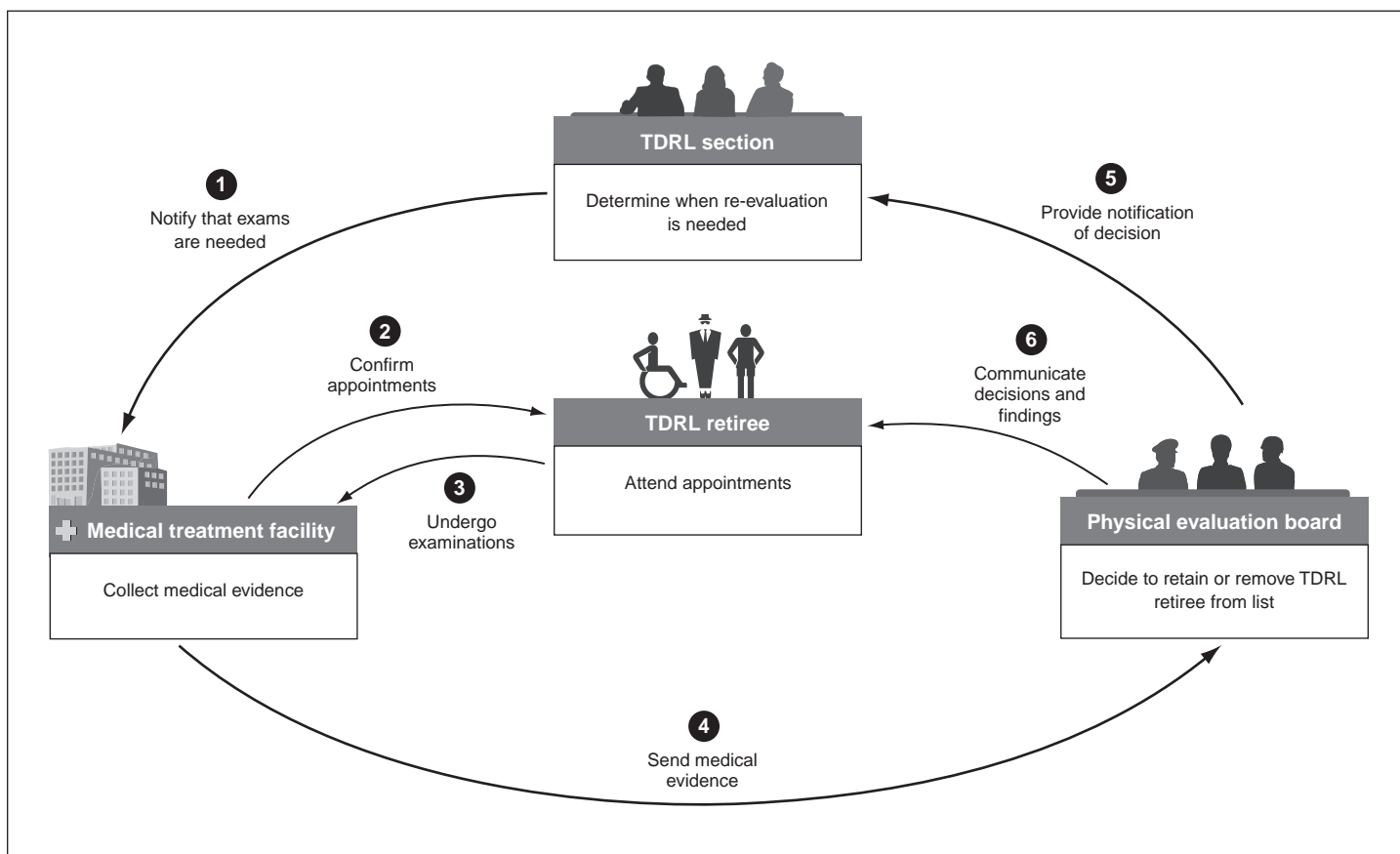
The Services Do Not Track Periodic Medical Reexaminations for Timeliness

Officials that we spoke with in each of the services told us that TDRL medical reexaminations do not necessarily occur every 18 months, as required by law. As previously noted, an effective system of internal controls would include policies, procedures, and mechanisms to help the services ensure that the requirements of the law are being met. However, the services do not collect data needed to know how often and why TDRL medical reexaminations are late or fail to occur, nor have they established performance measures or goals to guide the timely processing of TDRL reexaminations.

The services' procedures for tracking TDRL cases and enforcing the statutory requirements are roughly similar. (See fig. 8.) Each service assigns someone from their TDRL administrative unit to monitor when a TDRL case is due for a reexamination and to forward the details of the servicemember's case, including which medical tests need to be performed, to the MTF located nearest to the most current address on file for the temporary retiree. Typically, the MTF is notified 2 months before the reexamination is due, to allow the MTF time to schedule the examinations and forward orders to the temporary retiree, and to allow the temporary retiree to make other arrangements, if needed.

³²The recent DOD report to Congress from the Office of the Under Secretary of Defense (Personnel and Readiness), *The TDRL: An Assessment of its Continuing Utility and Future Role*, was prepared in response to a statutory requirement in the National Defense Authorization Act for Fiscal Year 2008 (Pub. L. No. 110-181, sec. 1647). Although this report presents some information about outcomes and years spent on the TDRL across the services, it does not compile information on the TDRL outcomes associated with different types of disabilities.

Figure 8: TDRL Reexamination Process



Sources: GAO analysis of TDRL procedures; Art Explosion (images).

The services do not track the extent to which TDRL reexaminations occur every 18 months, as required. However, late or missed TDRL medical reexaminations are not uncommon, based on our interviews with staff at MTFs, PEB officials, and focus group discussions with temporary retirees.³³ When asked about the reasons for late or missed TDRL reexaminations, military officials and administrative staff responsible for scheduling them in each of the services offered several possible reasons. They cited temporary retiree noncompliance, such as failure to update contact information or to attend scheduled appointments, as an obstacle

³³In two cases that we encountered during the course of this review, temporary retirees who had been on the list for over 3 years had not had any reexaminations.

to completing examinations on time. They also acknowledged that the MTFs cannot always schedule examinations on time. This may be because they do not always receive the reexamination package far enough in advance from TDRL administrators or because appointment slots for certain medical specialties, particularly mental health, are limited. Staff at MTFs across the services also reported that TDRL cases are not always given the appropriate level of priority when appointments are scheduled.³⁴ Nevertheless, without better data, the services cannot effectively identify and address the reasons for delayed or missed reexaminations.

There Is Only Limited Use of Nonmilitary Physicians to Reduce Burdens Associated with TDRL Reexaminations

To better leverage limited resources and expedite TDRL case processing, current service procedures allow MTF's to rely on the results of medical examinations performed by civilian and VA physicians to meet reexamination requirements. However, staff at most MTFs we contacted said that they knew of few instances in which the military allowed TDRL reexaminations to be conducted by nonmilitary physicians to reduce the travel burden on a temporary retiree, or to ease MTF workloads.

Generally, TDRL administrators refer temporary retirees to the closest MTF that has all medical specialties needed to evaluate their case. However, many temporary retirees do not live near an MTF with all needed medical specialties. Staff at some MTFs reported that, among those for whom they schedule TDRL reexaminations, between one-quarter to one-half travel more than a few hours to be examined—despite having easier access to nonmilitary physicians. One MTF staff member we spoke with described a case in which a temporary retiree from the Navy traveled by car for nearly 10 hours—approximately 460 miles—from Sacramento, Calif., to Camp Pendleton Hospital in southern California. In another case, an MTF staff member described a case in which an Army retiree drove for nearly 8 hours—approximately 480 miles—from Wisconsin to Ireland Community Hospital in Fort Knox, Ky. Lengthy travel can be particularly burdensome for those who experience pain as a result of their medical conditions or for those who have limited finances or inflexible

³⁴ According to military officials, MTF staff at the clinics where TDRL retirees need appointments often do not understand that although TDRL members are retirees, DOD regulations state that they have the same priority for appointments as active duty members.

employment situations.³⁵ Moreover, according to some MTF staff, some temporary retirees have told them that they fear losing their job if they miss work to keep a medical appointment for a TDRL reexamination.

As noted, the limited availability of appointment slots for certain medical specialties and a lack of priority in scheduling at some MTFs can contribute to delays in completing TDRL reexaminations. This may be a result of rising MTF workloads, caused by increasing numbers of injured servicemembers returning from combat and increasing disability caseloads.

Despite travel burdens for some temporary retirees and difficulties in completing timely TDRL reexaminations at MTFs in the face of heavy workloads, the use of nonmilitary physicians to help prepare TDRL medical examination reports has been limited, according to MTF staff. Military officials said that this is because VA and civilian physicians, who are not subject to DOD requirements, are not always familiar with military disability evaluation requirements and may not include information that the services need to make a determination about whether a temporary retiree should be removed from the TDRL. However, military officials said that this could be addressed by providing clearer guidance to nonmilitary physicians on how to prepare TDRL reexamination reports. It should be noted that one VA hospital is already conducting medical examinations for three MTFs as part of the joint DOD-VA disability evaluation pilot.³⁶

The Services' Procedures Do Not Ensure Consistent Enforcement of TDRL Rules

DOD requires temporary retirees to submit to a periodic medical examination at least once every 18 months. In addition, the services require temporary retirees to provide them with current contact information to facilitate these examinations. Although the services do not collect data on the extent to which temporary retirees fail to comply with reexamination requirements, MTF staff in each service reported problems with temporary retirees not showing up for scheduled appointments. Some MTF staff that we spoke with said that cancelled TDRL

³⁵ According to military officials, the services provide servicemembers with the option of arranging air travel through a military travel agency, which requires no cash outlay from the servicemember. In addition, service officials told us that they have mechanisms to provide up-front financial assistance upon request, but servicemembers must request this assistance.

³⁶ [GAO-08-1137](#).

appointments due to temporary retirees' failure to show up happened in relatively few cases each month, while others said that this happened much more often.

Although DOD and military service regulations allow for suspending TDRL pay if temporary retirees fail to satisfy these requirements, the procedures in place across the services are insufficient to ensure that these provisions are enforced consistently. For example, when temporary retirees fail to update their contact information, each service's procedures specify what TDRL staff should do to locate and contact them, but do not clearly specify at what point these efforts should be discontinued. In addition, when temporary retirees fail to keep appointments for medical reexaminations, these procedures allow for rescheduling them, but do not specify how many appointments the retirees can miss before TDRL monthly payments are stopped or what constitutes a valid reason for missing an appointment. As a result of the lack of specificity, the number of steps taken at different MTFs to locate and encourage temporary retirees to go to their reexaminations before sending these cases back to TDRL administrators for a stop-pay decision may vary widely.

Service officials said that the flexibility they have in making stop-pay decisions allows them to consider extenuating circumstances, including the potential impact that temporary retirees' disabilities may have on their ability to comply. For example, those with certain brain injuries or mental health conditions may have trouble remembering what they are required to do while on the TDRL. Stopping pay in these circumstances may be unfair to the temporary retiree, particularly when servicemembers have dependents who rely on these benefits. However, DOD regulations do not provide guidance to the services on permissible exceptions.

TDRL Information Is Not Always Adequate or Accessible to Temporary Retirees

Information about temporary disability retirement that the services provide to those they place on the TDRL is not always clear or complete and can be difficult for TDRL retirees to access. The official PEB findings forms, themselves, do not fully explain the reason for an individual's placement on the list or what is required of the TDRL retiree. Counseling provided by PEBLOs was reported to be inconsistent and lacking in follow-through, while the information contained in the services' pamphlets, brochures, and fact sheets was not always complete. Military Web sites that might have provided more thorough and ongoing information were also incomplete or difficult to find. TDRL retirees participating in our focus groups expressed considerable confusion about and dissatisfaction with their limited access to information and contacts.

PEB Findings Forms Lack Important Information about the TDRL and Can Be Confusing

A PEB findings form is used to document each PEB disability decision. A copy of this form is also given to servicemembers to notify them of the PEB's decision in their case. In addition to indicating the decision, each service's PEB findings form provides basic information about all disabling conditions—how each is related to military service, a disability rating for each disabling condition, and an overall rating—and the servicemember's years of qualifying service. When the decision is made to place a servicemember on the TDRL, the PEB findings form can lack important information about the TDRL, and the information that is provided can be confusing. (See apps. III, IV, and V for examples of each service's PEB findings form.) For example, in TDRL cases, the services are not required to explain the following on the findings form:

- *Why disability retirement benefits were granted temporarily rather than permanently*—specifically, that the PEB was unable to determine, based on the medical evidence at that time, what the servicemember's permanent disability rating should be.
- *When a final disability decision will be made*—specifically, that the PEB will determine the servicemember's permanent disability rating when the medical evidence shows that the disabling condition has stabilized or when the TDRL retiree has been on the list for 5 years, whichever comes first.

We examined a limited number of actual PEB findings forms that temporary retirees had received. None clearly explained why the servicemembers were granted temporary versus permanent disability retirement, when they could expect to receive a final disability decision, or which disabling conditions have been determined to be unstable. Further, the Army's finding form does not specify for a TDRL determination which, if any, of the listed conditions is considered permanent and stable. It does, however, include standard language about the servicemember's duty to keep the Army informed about their current mailing address and to report for medical reexaminations associated with PEB determinations, as well as when the servicemember's first TDRL reexamination is likely to occur. In contrast, the Air Force, Marine Corps, and Navy PEB findings forms do not include information about the servicemember's responsibilities while on the list or when their first reexamination is likely to occur, but they do indicate that the servicemember has a medical condition that may be permanent.

In some cases, the information in PEB findings forms is presented in a way that makes it difficult for servicemembers to understand, regardless of the

disability decision made in their case. Based on the information contained in their PEB findings forms, some TDRL retirees in our focus groups found it difficult to understand how ratings for individual disabling conditions are combined into a single overall disability rating. For example, one Army PEB findings form that we reviewed presented the equation, shown in figure 9, to demonstrate how one servicemember's overall disability rating had been calculated.

Figure 9: Example of Calculation of Disability Rating Contained in a PEB Findings Form

$$CR: 50 + 40 = 70 + 20 = 76 + 20 = 81 + 10 = 83 + 10 = 85 = 90 \text{ percent}$$

Source: Copy of Army PEB findings form received from a temporary retiree.

Although the equation includes all of the percentage ratings for each of the servicemember's rated conditions, it is not clear as to how the numbers correspond to each percentage rating and how each of the listed percentages logically results in the final placement rating. Furthermore, many TDRL retirees in our focus groups indicated their difficulty in understanding this information.

PEBLO Counseling Is Not Always Useful

DOD requires that servicemembers evaluated by a PEB be provided counseling about the significance and consequences of their PEB disability determination and any associated rights and benefits. For temporary retirees, this should occur at the time a PEB places them on the list and when any subsequent decisions to retain them on the list are made. In practice, each service provides this counseling through a PEBLO.³⁷ PEBLOs have a critical role in helping temporary retirees understand what it means to be placed on the TDRL. According to focus group discussions, however, PEBLO counseling was not necessarily thorough or consistent. It involved meeting one-on-one with a PEBLO in some cases and participating in a group meeting in others. While some focus group participants knew of someone they could call if they needed information about the TDRL, many did not. Moreover, the counseling that temporary

³⁷ Each service requires its PEBLOs to provide counseling to TDRL retirees. PEBLOs are responsible for explaining the significance of particular PEB findings or documents TDRL retirees receive and are expected to find answers to retirees' questions if they cannot answer them.

retirees receive also appears to vary across services. Air Force and Navy procedures allow for PEBLO counseling to be available at any time throughout the disability evaluation process, while the Army requires only that counseling be provided at specific times in the process. Although officials from each of the services told us that temporary retirees are provided with a point of contact, the lack of access to someone who could answer their questions was a repeated theme in our focus groups.

There are several reasons why the quality of PEB counseling may vary across the services. In a previous report,³⁸ we found that, although each service employs PEBLO counselors in accordance with DOD rules, each places them in a different organizational unit, provides them with different levels of training, and begins the counseling process at different points in the disability evaluation process.

In each of our focus groups, the quality of counseling was a common theme, and not all participants remembered receiving counseling at the time they were placed on the TDRL. Although some participants in each of our focus groups said that counseling had been helpful, the prevailing opinion across all groups was that it did not meet their needs and that it was not helpful.

Additional Information about the TDRL Is Not Always Complete or Easily Accessible

In addition to what appears on the PEB findings form and what is provided by PEBLOs, each of the services provides information about the TDRL through written handouts.³⁹ However, the additional material provided by the Air Force and Navy does not always address what temporary retirees indicated was confusing or of most importance to them. Specifically, the Air Force and Navy material does not always include information about the overall disability evaluation system, stability of disabilities, the consequences of not complying with TDRL requirements, or what the eventual outcome of a TDRL case might be. It also does not always provide a correct point of contact for questions temporary retirees might have about the TDRL after they have read through this additional material. The information the Air Force and Navy have developed includes general information about the TDRL process. The Air Force's one-page fact sheet offers a broad explanation of why a servicemember may be placed on the TDRL, the rights and responsibilities of TDRL retirees, and points of

³⁸See [GAO-06-362](#).

³⁹Appendix I contains a list of the materials and Web sites we reviewed.

contact for general questions about retired pay. It does not provide specific information servicemembers may need about the TDRL, such as who servicemembers may notify when they need to report changes to their addresses and phone numbers. The Navy also has a brochure that answers seven questions about TDRL pay and benefits, and like the Air Force fact sheet, offers a broad explanation of why a servicemember may be placed on the TDRL and the rights and responsibilities of temporary retirees. The Navy brochure also provides a list of administrative offices that temporary retirees may contact about pay and benefits; however, the phone number listed for TDRL information was not working when we called it.⁴⁰ Additionally, while some MTF staff reported that paying for travel costs up-front can be an issue for temporary retirees with limited finances, the Navy brochure does not mention that temporary retirees may request an advance payment for travel costs prior to incurring them. Lastly, the Air Force and Navy materials do not explain that in addition to loss of monthly pay, noncompliance with TDRL requirements may also result in a loss of health insurance, including coverage for family members.

In contrast, the Army provides temporary retirees with a frequently asked questions (FAQ) sheet, with answers to 25 questions about why a servicemember is placed on the TDRL, their rights and responsibilities while on the TDRL, potential final determinations, and points of contact servicemembers can go to for answers to their questions about the TDRL. The Army has also developed a handbook that describes the entire disability evaluation process and includes basic information about the TDRL.⁴¹

Information on the TDRL was also generally available on service Web sites, but we found that it was not easy to locate and was often incomplete. None of the services' home pages included a direct link to TDRL information, and simple searches for TDRL information on each of these pages did not lead directly to TDRL information. A more lengthy search of the services' individual Web sites eventually led to information about the TDRL, although the amount of information varied by branch. On the Army's Web site, information on the TDRL could be found by accessing a link to the Army's Physical Disability Evaluation System handbook. Although the Navy's printed TDRL brochure offered a Web address for TDRL information, the address was not available when we

⁴⁰This information is as of January 2009.

⁴¹U.S. Army, *Army Physical Disability Evaluation System (PDES)*.

attempted to access it. However, the Bureau of Naval Personnel Web page included a TDRL information page that offered a series of links to relevant regulations, potential final determinations for temporary retirees, and likely reexamination time frames. A phone number was also provided on this Navy Web page, but it was the same, nonworking phone number provided in the Navy's printed brochure. The Air Force Web site included a brief summary of the TDRL, but lacked information about noncompliance with TDRL requirements and the 5-year limit on receipt of temporary retirement benefits.

Based on the results of our focus groups with temporary retirees, in particular the gaps in information we found in the PEB findings forms and lack of a specific TDRL point of contact, appear to result in confusion about the TDRL and dissatisfaction with placement on the list. In most of our focus groups, there was confusion about why participants had been placed on the TDRL or what participants might expect throughout the TDRL process. In some cases, participants were unable to reconcile what they knew about the TDRL with the circumstances in their individual case. Specifically, there was little understanding across our focus groups of the concept of stability and how it applied to their particular disabilities. Furthermore, in several focus groups, participants said that they had learned what they were required to do while on the TDRL through their own initiative, largely relying on contacts with colleagues or their own research to obtain information about the purpose of TDRL reexaminations and decisions to retain them on the TDRL as opposed to receiving permanent disability.

Conclusions

The growth in TDRL caseloads further taxes limited resources available to the military disability evaluation system, which is already struggling to efficiently process increasing numbers of cases involving ill and injured servicemembers. Processing TDRL cases adds to the complexity of this system and to its cost. The TDRL process also has a significant impact on servicemembers' lives. If not managed effectively and efficiently, it can deprive servicemembers of timely, appropriate, and fair disability determinations, and prevent many from moving on with their lives after incurring service-related disabilities.

There are several indications that the services' management of the TDRL is problematic. Currently, DOD's quality assurance procedures do not take advantage of available data on outcomes in past TDRL cases to avoid postponing final disability determinations for servicemembers with disabilities whose severity is unlikely to change. Current quality assurance procedures also

do not provide for the systematic review of TDRL placement decisions. Therefore, the DOD has no way of knowing whether these placements are appropriate or consistent. Further, DOD does not have effective mechanisms for holding staff accountable for the timeliness of TDRL reexaminations or otherwise ensuring the overall efficiency of TDRL case processing. Without a system for monitoring the timeliness of reexaminations, a clear policy for addressing noncompliance, and a strategy for leveraging nonmilitary resources to complete reexaminations, DOD cannot avoid sometimes lengthy delays in final determinations in TDRL cases. Further, by failing to make a final determination as soon as temporary retirees are removed from the TDRL, the services are denying some temporary retirees benefits to which they are entitled. Finally, inadequate information on PEB finding forms about why individuals are placed on the TDRL and little or no access to a point of contact that can address temporary retirees' questions about the process, make it less transparent. This may generate distrust and frustration among many temporary retirees and affect their ability and willingness to comply with TDRL requirements. Without a better understanding of the information needs of temporary retirees and more proactive contact with them, DOD is missing an important opportunity to remove potential obstacles to temporary retirees' compliance with TDRL requirements.

In addition to the TDRL management issues we identified, the outcomes we found in TDRL cases raise questions about the list's design and purpose. In most of the cases we reviewed, the temporary retiree received a permanent disability rating well before the 5-year TDRL limit, which suggests that the current TDRL time limit could be shortened. With only 1 in 100 temporary retirees returning to active duty, the TDRL also does not appear to be a very effective mechanism for meeting the needs of the military. Finally, most temporary retirees received a final rating equal to or lower than their initial one, and very few were eventually eligible for higher permanent disability payments. As a result, the TDRL simply postponed the inevitable for many with service-related disabilities and delayed their transition from military to civilian life.

Recommendations for Executive Action

To ensure that TDRL placement and retention decisions are appropriate and consistent, the Secretary of Defense should take the following two actions:

- Direct the Secretaries of the Air Force, Army, and Navy to better inform their decisions about whether or not to place or retain someone on the TDRL by taking into account data from past TDRL cases on outcomes for particular types of disabilities; and

-
- systematically review the appropriateness and consistency of each service's PEB decisions regarding the stability of disabilities.

To ensure that TDRL reexaminations occur at least once every 18 months, the Secretary of Defense should take the following four actions:

- Direct each service to track and periodically report on the timeliness of medical reexaminations in TDRL cases;
- develop DOD-wide standards and goals for the timeliness of TDRL reexaminations;
- establish a clearer policy specifying how the services should enforce the requirements that temporary retirees submit to periodic reexaminations and notify TDRL administrators when they have a change of address; and
- expand the use of nonmilitary physicians for conducting TDRL reexaminations, in accordance with DOD guidance.

To prevent unnecessary delays in permanent disability determinations for temporary retirees and gaps in the receipt of disability benefits they are entitled to, the Secretary of Defense should take the following action:

- Direct the services to ensure that temporary retirees receive a final determination upon expiration of their 5 years on the TDRL, as required by law.

To ensure that temporary retirees receive adequate information to understand why they are placed on the list and the importance of complying with TDRL requirements, we recommend that the Secretaries of the Air Force, Army, and Navy take the following three actions:

- Assess the adequacy of information they provide regarding the TDRL, including the information contained on their PEB findings forms and other materials, and provided by PEBLOs, and make improvements where needed;
- take steps to encourage ongoing contact between temporary retirees and TDRL administrators by, for example, maintaining a working and easily accessible TDRL administrative telephone hotline for temporary retirees; and

-
- improve access to Web-based information about the TDRL.
-

Matter for Congressional Consideration

Given the low number of temporary retirees who return to the military, the high proportion who eventually become eligible to receive permanent military disability retirement benefits, and the added cost to the military of administering TDRL cases, the Congress may wish to consider shortening the current 5-year maximum tenure on the TDRL.

Agency Comments and Our Evaluation

We provided a draft of this report to DOD and the services for review and comments. DOD provided written comments, which are reproduced in appendix IX. DOD indicated that it concurs with each of our recommendations, with comments in a few cases.

With respect to our recommendation that DOD establish a clearer policy for how the services should enforce TDRL requirements for temporary retirees, DOD commented that the services provide servicemembers directions regarding TDRL requirements that they must comply with, and that it is not reasonable to assume that DOD can keep track of every change of address if temporary retirees fail to keep the information current. We agree. However, our recommendation calls for DOD to establish more specific guidelines on when and what action should be taken in response to temporary retirees' failure to comply with TDRL requirements, and is intended to ensure equitable treatment in all cases of noncompliance across the services.

DOD noted that our recommendation to expand the use of nonmilitary physicians for conducting TDRL reexaminations should include a statement that nonmilitary physicians should be "trained in and will accept examinations of individuals using VA-approved templates." DOD also indicated that "use of non-military physicians should also include specific reference to reexaminations at non-military and non-VA facilities given training and qualification consistent with Title 10 and Title 38, USC." We believe that our recommendation falls within the services' current authority to use reports of medical examinations from nonmilitary physicians and facilities under DOD Instruction 1332.38, which assigns the responsibility for assuring the adequacy of these examinations to MTFs. In addition, this instruction currently encourages physicians performing reexaminations for the TDRL to use VA's physician's guide. Our recommendation is not suggesting a change to the underlying guidelines prescribing the use of nonmilitary physicians; rather, we are

recommending that use of nonmilitary physicians should be expanded. In response to DOD's comments, we have added the phrase "in accordance with DOD guidance" to our recommendation.

Finally, DOD concurred with our recommendations for ensuring that temporary retirees are provided easier access to military personnel who can answer their TDRL questions and to Web-based TDRL information. It also commented that both are readily available to temporary retirees. While we acknowledge the services' current efforts in this area, they do not appear to be enough to meet the needs of temporary retirees. The results of our review of the accessibility of TDRL points of contact and Web-based information, as well as temporary retirees' reports of difficulty accessing both, indicate a need for improvement in these areas.

DOD also provided technical comments, which we incorporated in the report as appropriate.

We are sending copies of this report to relevant congressional committees, the Secretary of Defense, the Secretary of Veterans Affairs, and other interested parties. In addition, the report will be available at no charge on GAO's Web site at <http://www.gao.gov>.

If you or your staffs have any questions about this report, please contact me at (202) 512-7215 or bertonid@gao.gov. Contact points for our Offices of Congressional Relations and Public Affairs may be found on the last page of this report. Key contributors to this report are listed in appendix X.

Sincerely yours,



Daniel Bertoni
Director, Education, Workforce,
and Income Security Issues

Appendix I: Scope and Methodology

The objectives of our review were to examine (1) recent trends in the Temporary Disability Retired List (TDRL) caseload size, (2) recent trends in the characteristics of servicemembers placed on the TDRL, (3) disability retirement outcomes for TDRL placements, (4) the adequacy of TDRL management, and (5) the adequacy of information provided to temporary retirees.

Identifying Trends in TDRL Caseload Size

To identify trends in TDRL caseload size, we examined data provided by the Department of Defense's (DOD) Defense Manpower Data Center (DMDC) on the size and makeup of each service's annual TDRL caseload for fiscal years 2001 through 2007. More specifically, we compared TDRL caseload sizes in the last month of each fiscal year (September) over time, both within and across the services. We also compared the relative proportion of former active duty and reserve servicemembers in the annual TDRL caseload over time.

To determine what could have contributed to the growth in TDRL caseloads, we compared the trend in TDRL caseload size to the trend in the (1) number of cases that received disability evaluation system determinations, (2) TDRL placement rate, and (3) number of cases removed from the TDRL each year,¹ for fiscal years 2001 through 2007. We obtained these data from

- the Air Force Military Personnel Data System;
- the Army Physical Disability Case Processing System; and
- the Joint Disability Evaluation System, which captures Physical Evaluation Board (PEB) case data for the Navy and Marine Corps.

To assess the reliability of each of these systems, we reviewed documentation related to each that provided information such as record layout, data dictionary, how data were collected and stored, measures taken to ensure data quality, and screens used to extract the data we required. We also interviewed military personnel knowledgeable about each system to obtain more detailed information about the system and the

¹Total removals from the TDRL each year included cases in which the servicemember was (1) placed on the Permanent Disability Retired List (PDRL); (2) separated from the military, either with severance or without any disability benefits; (3) deceased; or (4) found fit for duty.

data in it. Based on our assessment, we determined that data from each of these systems were sufficiently reliable for our analyses.

Determining the Characteristics of TDRL Placements

To identify the characteristics of individuals placed on the TDRL each month from January 2000 through December 2007 (see table 3), we analyzed monthly transaction-level data DMDC had extracted for us from its Retired Pay File,² a database containing information on individual retirees from the Army, Air Force, Marine Corps, and Navy.

Table 3: Total Number of Individuals Placed on the TDRL, by Service, Calendar Years 2000 through 2007

Service	Calendar year								Calendar years 2000-2003 total	Calendar years 2000-2007 total
	2000	2001	2002	2003	2004	2005	2006	2007		
Air Force	334	382	314	281	318	439	514	685	1,311	3,267
Army	961	1,039	1,054	999	1,549	1,771	1,553	1,764	4,053	10,690
Marine Corps	314	315	305	328	516	615	827	800	1,262	4,020
Navy	676	788	628	612	734	788	880	855	2,704	5,961
DOD-wide total	2,285	2,524	2,301	2,220	3,117	3,613	3,774	4,104	9,330	23,938

Source: GAO analysis of Defense Manpower Data Center Retired Pay File.

To determine the characteristics of temporary retirees placed on the TDRL in calendar years 2000 through 2007—including disability rating percentages, their years of service, and the proportions who were formerly active duty servicemembers and reservists—we analyzed data for these individuals the DMDC extracted for us from their Retired Pay File.

To identify disabilities among temporary retirees placed on the TDRL in calendar years 2000 through 2007, we obtained the Department of Veterans Affairs Schedule for Rating Disabilities (VASRD) diagnostic codes associated with each temporary retiree’s case from the services’ PEBs, and grouped these disabilities under the appropriate disability categories provided in the VASRD.

²The Retired Pay File documents every pay action taken in each temporary retiree’s case within a specified time frame.

Determining TDRL Outcomes for Those Placed on the List

We focused many of our analyses of TDRL outcomes on individuals placed on the list in calendar years 2000 through 2003. At least 5 years (the maximum amount of time someone can spend on the TDRL) had elapsed since these individuals had been placed on the list, so a final disability determination should already have been made in each case.³

To determine what final PEB disability determinations were for TDRL placements from calendar years 2000 through 2007, we examined monthly transactions from January 2000 through August 2008 for each case, contained in the data we received from DMDC, to identify movement off the TDRL due to (1) placement on the PDRL, (2) separation from the service, (3) death, or (4) return to active duty.⁴ We counted the first of these pay actions encountered after the date of placement on the TDRL as the final disability determination in that case. We examined data we had received from the relevant PEB in each case to determine which of those separated from the service had received a disability severance payment and which had been separated with no disability benefits.

We also used the same DMDC monthly transaction data to determine how long after placement on the TDRL temporary retirees received a final disability determination. We counted the number of months, from the month the individual in each TDRL case was initially placed on the list, to the month that the individual was first removed from the TDRL due to (1) placement on the PDRL, (2) separation from the service, (3) death, or (4) return to active duty. In 1,004 cases, a separation from the service action was followed in 1 or more months by a placed on the PDRL action. In these cases, the time it took to receive a final disability determination was based, instead, on the month in which placement on the PDRL occurred.

Finally, data from the DMDC Retired Pay File on the initial and final disability percentage ratings for TDRL placements in calendar years 2000 through 2003 were used to identify how these ratings differed, if at all. To determine the amount of monthly benefits individuals would receive, we

³A full 5 years' worth of data were not available for 138 of the 293 cases in our 2000 through 2003 cohort whose status in August 2008 was "awaiting a final disability determination." It is possible that some of these cases could have had final dispositions before or at 5 years that occurred after August 2008 and were not captured in our analysis.

⁴We saw that in a small number of cases, the first removal codes could be followed by subsequent TDRL or PDRL activity. Due to the complexity of this small number of cases, we decided to characterize the outcomes as first movement off the TDRL.

multiplied the disability rating as a percentage of base pay.⁵ Thus, we looked at the disability rating and applied the following pay guidelines to determine what percentage of base pay TDRL retirees would be eligible to receive: (1) TDRL payments are a minimum of 50 percent of base pay; (2) the PDRL is not subject to any minimum payments; and (3) for both the PDRL and the TDRL, the maximum payment is 75 percent of base pay. We then compared the percentage of base pay individuals would be eligible for while on the TDRL versus the percentage they would be eligible for on the PDRL. From here, we could determine the number of TDRL retirees whose monthly payments would increase, decrease, or stay the same once they moved to the PDRL.

To assess the reliability of data from DMDC's Retired Pay File, as well as the TDRL caseload data we received from the DMDC, we performed initial tests and checks on the data to verify that records matched our selection criteria and were sufficiently reliable for our analyses. We obtained documents from the military on the Retired Pay File edit file layout, the record layout of the pay file, the definition of the data variables, how the data in this file were collected, and the measures taken to assure data quality. We also conducted interviews with DMDC staff to obtain more specific information regarding the data, such as how they are stored and maintained and how they should be interpreted and used. Based on our assessment, we determined that these data were sufficiently reliable for our analyses.

In addition to our own analysis, we reviewed and discussed with DOD officials the results of their recent study of the TDRL, which also examined TDRL retirees' characteristics and outcomes.⁶

Assessing the Adequacy of TDRL Management

To assess the adequacy of TDRL management, we reviewed relevant laws, regulations and procedures to determine

- how TDRL decisions were made, monitored, and evaluated;

⁵For estimates of monthly cash payments, we only looked at temporary retirees' disability ratings. We did not assess if years of service multiplied by 2.5 would result in higher monthly retirement payments.

⁶DOD, Office of the Under Secretary of Defense (Personnel and Readiness), *Report to Congress, The Temporary Disability Retired List (TDRL): An Assessment of its Continuing Utility and Future Role* (Washington, D.C., Oct. 2, 2008).

- how reexaminations for TDRL were arranged and tracked for timeliness;
- what use was made of reexaminations by nonmilitary physicians to reduce the burden on MTFs; and
- how TDRL requirements for temporary retirees were enforced.

Specifically, we interviewed military officials and staff from each service involved in the TDRL process, including PEB members and physicians, Medical Command representatives, staff in each service's TDRL administrative office or unit, Physical Evaluation Board Liaison Officers (PEBLO), and staff at selected military treatment facilities (MTF) responsible for scheduling and monitoring the completion of TDRL reexaminations. We assessed the adequacy of what we learned about the management of the TDRL based on (1) our review of TDRL laws, regulations, and other written policies and guidance; (2) the results of our interviews; and (3) its consistency with internal control standards for the federal government and the requirements of the Government Performance and Results Act of 1993.

For our discussions with PEBLOs, we selected MTFs across the services. We also considered geographic diversity and facility size when selecting these facilities. The information we obtained from PEBLOs at these facilities is testimonial in nature and not intended to reflect the practices, experiences, or opinions of PEBLOs at MTFs, in general. (See table 4.)

Table 4: Selected Characteristics of Military Treatment Facilities (MTF) Contacted

MTF	Service	Geographic region	Average monthly TDRL caseload^a
United States Air Force Academy Medical Facility	Air Force	West	10-15 cases
Wright Patterson Medical Center, Wright Patterson Air Force Base	Air Force	North	20-45 cases
Wilford Hall Medical Center, Lackland Air Force Base	Air Force	South	20-50 cases
McDonald Army Health Center, Fort Eustis	Army	North	24 cases
Brooke Army Medical Center, Fort Sam Houston	Army	South	≥ 25 cases
Darnall Army Medical Center, Fort Hood	Army	South	≥ 25 cases
Ireland Community Hospital, Fort Knox	Army	North	15-20 cases
Navy Medical Center, Portsmouth	Navy	North	≥ 25 cases
Navy Hospital, Camp Pendleton	Navy	West	1-2 cases
Navy Hospital, Jacksonville	Navy	South	20-30 cases

Source: Interviews with MTF staff.

^aEstimate provided by officials at each MTF.

To help assess the adequacy of TDRL management, we also examined the experiences and views of temporary retirees from the Air Force, Army, Marine Corps, and Navy. To obtain this information, we conducted a series of 12 focus groups in June and August 2008 with individuals who were on the TDRL. Three focus groups were conducted at each of four locations—Norfolk, Va.; Quantico, Va.; San Antonio, Tex.; and Killeen, Tex. These locations were selected because each provided a large pool of temporary retirees from which to draw focus group volunteers. Together, these locations also enabled us to obtain the perspectives of temporary retirees from each of the services.

To recruit volunteers for these focus groups, we obtained a list of temporary retirees who resided within a 50-mile radius of each location from the Defense Finance and Accounting Service. We attempted to contact each temporary retiree on the list to invite them to participate in a focus group conducted in their area. A total of 57 temporary retirees participated in these focus groups. (See table 5.)

Table 5: Percent of Focus Group Participants from Each Service

Service	Percent of total focus group participants
Air Force	12%
Army	49
Marine Corps	9
Navy	30
DOD-wide total	100%

Source: GAO analysis.

Focus group participants had a wide range of characteristics. They had an average of 12 years of military service, ranging from a minimum of 2, to a maximum of 28 years. About three-quarters had been active duty, and about one-quarter had been in the reserves. About one-quarter had served in Operations Enduring Freedom or Iraqi Freedom.

To obtain information from the focus groups, we established a standard protocol to facilitate the discussions. Each focus group covered several major topics, including the overall disability evaluation process, placement on the TDRL, periodic reexaminations while on the TDRL, and advantages and disadvantages of being placed on the list. A GAO facilitator led each discussion to keep participants focused on the specified issues within discussion time frames. With the consent of focus group participants, we recorded each discussion and had each recording professionally transcribed.⁷

To summarize the results of our focus groups, we identified themes participants raised that were common to more than one group. We verified our analysis to ensure its reliability. While we identified a number of common themes across the 12 focus groups, our results cannot be generalized to the universe of all temporary retirees.

Finally, we contacted six veterans' service organizations to obtain their views about the TDRL process and how it affects servicemembers placed on the list. We obtained written comments from the Disabled American

⁷Information that could identify any participant was left out of the transcripts to protect participants' privacy.

Veterans, the Iraq and Afghanistan Veterans Association, and the Military Officers Association of America.⁸ (See apps. VI, VII, and VIII.)

Assessing the Adequacy of Information Provided to Temporary Retirees

To assess the completeness, clarity, and accessibility of information provided to individuals placed on the TDRL, we reviewed each service's PEB findings form and other written materials, as well as information available on the services' Web sites. (See table 6.)

Table 6: TDRL Information Sources Reviewed

Service	PEB findings forms	Brochures, pamphlets, and handbooks	Web sites (electronic information)
Air Force	<i>Findings and Recommended Disposition of United States Air Force Physical Evaluation Board, (AF Form 356, October 1995)</i>	<i>Temporary Disability Retirement List Fact Sheet</i>	http://ask.afpc.randolph.af.mil/main_content.asp?prods3=285&prods2=66&prods156
Army	<i>Physical Evaluation Board (PEB) Proceedings, (DA Form 199, June 1997)</i>	<i>Temporary Disability Retired List Frequently Asked Questions</i> http://www.pdhealth.mil/downloads/TDRL_FAQs.pdf	https://www.hrc.army.mil/site/Active/TAGD/Pda/pdapage.htm
		<i>Army Physical Disability Evaluation System (PDES)</i> https://www.hrc.army.mil/site/Active/TAGD/Pda/pdesystem.htm	
Marine Corps	<i>Findings of the Physical Evaluation Board Proceedings</i>		http://www.npc.navy.mil/channels http://209.85.173.132/search?sourceid=navclient-menuext&ie=UTF-8&oe=UTF-8&q=cache:http%3A%2F%2Fwww.woundedwarriorregiment.org%2FWWR.aspx
Navy	<i>Findings of the Physical Evaluation Board Proceedings</i>	<i>Temporary Disability Retired List Brochure</i>	http://www.navy.mil/swf/index.asp
			http://www.npc.navy.mil/CareerInfo/Retirement/DisabilityRetirements/

Source: GAO analysis.

The specific topics we looked for in PEB findings forms and other written materials, and on a service's Web site were (1) the purpose of the TDRL, (2) definitions of "stability" and "permanency," (3) rolls and responsibilities of temporary retirees while on the list, (4) ramifications of

⁸We also contacted the National Military Family Association, the Reserve Officers Association, and the Reserve Enlisted Association.

noncompliance with TDRL requirements, and (5) potential final disability determinations.

We also obtained information from our focus groups about the types of information they needed and wanted about the TDRL, their sources for information about the list, and the adequacy of the information they received.

Appendix II: Additional Data Tables

Table 7: DOD-wide Disability Evaluation System Determinations, Fiscal Years 2001 through 2007

Determination	Fiscal year													
	2001		2002		2003		2004		2005		2006		2007	
	Num	Pct	Num	Pct	Num	Pct	Num	Pct	Num	Pct	Num	Pct	Num	Pct
Placed on the PDRL	686	5	825	5	860	5	875	4	1,156	5	1,076	5	1,338	7
Placed on the TDRL	2,659	18	2,625	17	2,480	15	3,170	16	3,665	16	3,672	18	4,207	21
Separated	8,040	53	8,335	53	9,440	57	12,463	62	13,787	60	11,148	56	10,424	52
Found fit	3,713	25	3,951	25	3,774	23	3,463	17	4,390	19	4,032	20	3,944	20
Total	15,098	100	15,736	100	16,554	100	19,971	100	22,998	100	19,928	100	19,913	100

Source: Air Force, Army, and Navy PEB data.

Table 8: Disability Evaluation System Determinations, by Service, Fiscal Years 2001 through 2007

Service	Determination	Fiscal year			
		2001		2002	
		Num	Pct	Num	Pct
Air Force	Placed on the PDRL	288	10	394	9
	Placed on the TDRL	484	16	440	11
	Separated	487	16	1,161	28
	Found fit	1,714	58	2,183	52
	Air Force total	2,973	100	4,178	100
Army	Placed on the PDRL	263	4	250	3
	Placed on the TDRL	1,075	15	1,166	16
	Separated	5,128	72	5,127	71
	Found fit	659	9	649	9
	Army total	7,125	100	7,192	100
Marine Corps	Placed on the PDRL	28	2	28	2
	Placed on the TDRL	326	18	342	20
	Separated	1,145	62	1,096	63
	Found fit	360	19	265	15
	Marine Corps total	1,859	100	1,731	100
Navy	Placed on the PDRL	107	3	153	6
	Placed on the TDRL	774	25	677	26
	Separated	1,280	41	951	36
	Found fit	980	31	854	32
	Navy total	3,141	100	2,635	100

Appendix II: Additional Data Tables

2003		2004		2005		2006		2007	
Num	Pct	Num	Pct	Num	Pct	Num	Pct	Num	Pct
418	9	294	9	550	12	513	12	695	15
325	7	237	7	459	10	429	10	695	15
1,471	33	1,305	41	1,831	39	1,413	34	1,454	32
2,203	50	1,365	43	1,914	40	1,768	43	1,758	38
4,417	100	3,201	100	4,754	100	4,123	100	4,602	100
321	4	431	4	467	4	412	4	556	5
1,147	15	1,638	14	1,763	14	1,543	15	1,844	18
5,849	74	8,584	76	9,816	75	7,538	72	7,099	68
571	7	685	6	996	8	964	9	912	9
7,888	100	11,338	100	13,042	100	10,457	100	10,411	100
29	2	33	1	52	2	68	3	39	2
342	19	521	23	626	28	820	34	817	38
1,126	64	1,271	57	1,015	46	1,098	46	955	44
257	15	422	19	519	23	397	17	338	16
1,754	100	2,247	100	2,212	100	2,383	100	2,149	100
92	4	117	4	87	3	83	3	48	2
666	27	774	24	817	27	880	30	851	31
994	40	1,303	41	1,125	38	1,099	37	916	33
743	30	991	31	961	32	903	30	936	34
2,495	100	3,185	100	2,990	100	2,965	100	2,751	100

Source: Air Force, Army, and Navy PEB data.

Table 9: Number of Individuals Placed on and Removed from the TDRL, DOD-wide, Fiscal Years 2001 through 2007

	Fiscal year						
	2001	2002	2003	2004	2005	2006	2007
Placed on the TDRL	2,659	2,625	2,480	3,170	3,665	3,672	4,207
Removed from the TDRL	2,924	2,671	2,462	2,015	2,646	2,848	2,765

Source: GAO analysis of Air Force, Army, and Navy PEB data.

Table 10: Number of Individuals Placed on and Removed from the TDRL, by Service, Fiscal Years 2001 through 2007

		Fiscal year						
		2001	2002	2003	2004	2005	2006	2007
Air Force	Placed on the TDRL	484	440	325	237	459	429	695
	Removed from the TDRL	98	307	298	192	226	286	190
Army	Placed on the TDRL	1,075	1,166	1,147	1,638	1,763	1,543	1,844
	Removed from the TDRL	1,001	1,117	1,027	912	1,114	1,199	1,217
Marine Corps	Placed on the TDRL	326	342	342	521	626	820	817
	Removed from the TDRL	515	413	401	341	335	426	457
Navy	Placed on the TDRL	774	677	666	774	817	880	851
	Removed from the TDRL	1,310	834	736	570	971	937	901

Source: GAO analysis of Air Force, Army, and Navy PEB data.

Table 11: Number and Percent of TDRL Placements Who Had Been Reservists, by Service, Calendar Years 2000 through 2007

Service	Calendar year																Calendar years 2000-2007 total	
	2000		2001		2002		2003		2004		2005		2006		2007			
	Num	Pct	Num	Pct	Num	Pct	Num	Pct	Num	Pct	Num	Pct	Num	Pct	Num	Pct	Num	Pct
Air Force	35	11	95	25	35	11	36	13	49	15	89	20	74	14	56	8	469	14
Army	118	12	102	10	148	14	158	16	436	28	550	31	541	35	486	28	2,539	24
Marine Corps	8	3	11	4	9	3	12	4	22	4	25	4	66	8	105	13	258	6
Navy	28	4	44	6	30	5	65	11	79	11	81	10	111	13	67	8	505	9
DOD-wide total	189	8	252	10	222	10	271	12	586	19	745	21	792	21	714	17	3,771	16

Source: GAO analysis of data from the Defense Manpower Data Center Retired Pay File.

Table 12: Number and Percent of Reservists Receiving a Disability Evaluation System Determination, by Service, Fiscal Years 2001 through 2007

Service	Fiscal year														Fiscal years 2001–2007 total	
	2001		2002		2003		2004		2005		2006		2007			
	Num	Pct	Num	Pct	Num	Pct	Num	Pct	Num	Pct	Num	Pct	Num	Pct	Num	Pct
Air Force	417	14	546	13	659	15	500	16	787	17	665	16	549	12	4,123	15
Army	523	7	699	10	1,303	17	3,710	33	3,601	28	2,814	27	2,454	24	15,104	22
Marine Corps	100	5	120	7	128	7	210	9	229	10	224	9	213	10	1,224	9
Navy	280	9	294	11	308	12	333	10	328	11	225	8	154	6	1922	10
DOD-wide total	1,320	9	1,659	11	2,398	14	4,753	24	4,945	22	3,928	20	3,370	17	22,373	17

Source: GAO analysis of Air Force, Army, and Navy PEB data.

Table 13: Mean Number of Years of Military Service for TDRL Placements Who Had Been Active Duty and Reserve Military, DOD-wide, Calendar Years 2000 through 2007

	Calendar year							
	2000	2001	2002	2003	2004	2005	2006	2007
TDRL placements— Active Duty	8	7	8	7	7	6	6	6
TDRL placements— Reserve	10	10	10	9	7	7	6	6
All TDRL placements	8	8	8	7	7	7	6	6

Source: GAO analysis of Defense Manpower Data Center Retired Pay File.

Table 14: Mean Number of Years of Military Service for TDRL Placements Who Had Been Active Duty and Reserve Military, by Service, Calendar Years 2000 through 2007

		Calendar year							
		2000	2001	2002	2003	2004	2005	2006	2007
Air Force	TDRL placements—Active Duty	11	9	10	8	9	8	7	8
	TDRL placements—Reserve	8	8	8	7	7	8	6	6
	All TDRL placements	10	9	9	8	9	8	7	8
Army	TDRL placements—Active Duty	7	7	7	7	7	7	7	6
	TDRL placements—Reserve	11	11	10	9	7	7	6	6
	All TDRL placements	8	7	8	7	7	7	7	6
Marine Corps	TDRL placements—Active Duty	6	5	5	5	5	5	5	5
	TDRL placements—Reserve	13	9	8	10	7	5	4	4
	All TDRL placements	6	5	5	5	5	5	5	5
Navy	TDRL placements—Active Duty	9	8	9	8	8	7	8	8
	TDRL placements—Reserve	8	9	8	8	7	8	8	8
	All TDRL placements	9	8	9	8	8	7	8	8

Source: GAO analysis of data from the Defense Manpower Data Center Retired Pay File.

Table 15: Percent of TDRL Placements with a Residual of a TBI as a Disabling Condition, by Service, Calendar Years 2000 through 2007

Service	Calendar year								Calendar years 2000–2007 mean percent
	2000	2001	2002	2003	2004	2005	2006	2007	
Air Force	0.6	0.3	1.0	0.4	0.3	0.7	0.6	0.1	0.5
Army	2.2	3.9	3.6	4.5	3.9	6.8	7.8	8.4	5.6
Marine Corps	4.6	5.6	9.0	6.9	4.6	6.0	8.6	12.0	7.8
Navy	4.1	2.9	2.6	3.1	2.9	2.8	3.1	3.4	3.1
DOD-wide total	2.8	3.3	3.7	4.0	3.4	5.1	5.9	6.7	4.6

Source: GAO analysis of Air Force, Army, and Navy PEB data.

Table 16: Percent of TDRL Placements with Residual of a TBI Diagnosis, among Those with Any Disabling Neurological Conditions and Convulsive Disorders, by Service Calendar Years 2000 through 2007

Service	Calendar year								Calendar years 2000–2007 mean percent
	2000	2001	2002	2003	2004	2005	2006	2007	
Air Force	3	1	4	2	1	3	3	1	2
Army	9	16	14	19	13	21	23	26	19
Marine Corps	15	18	25	20	13	21	24	31	22
Navy	12	9	9	10	9	9	10	12	10
DOD-wide total	10	12	13	14	11	16	19	21	16

Source: GAO analysis of Air Force, Army, and Navy PEB data.

Table 17: Percent of TDRL Placements with PTSD as a Disabling Condition, by Service, Calendar Years 2000 through 2007

Service	Calendar year								Calendar years 2000–2007 mean percent
	2000	2001	2002	2003	2004	2005	2006	2007	
Air Force	1.2	2.1	4.0	4.2	3.7	7.3	16.1	8.2	6.7
Army	2.8	2.2	2.0	2.7	7.3	11.2	16.0	25.0	10.3
Marine Corps	1.3	0.7	0.3	0.6	3.2	13.2	18.7	17.2	10.1
Navy	1.5	0.8	1.5	0.8	3.0	4.8	4.2	4.9	2.9
DOD-wide total	2.0	1.5	1.9	2.1	5.3	9.7	13.9	16.5	7.9

Source: GAO analysis of Air Force, Army, and Navy PEB data.

Table 18: Percent of TDRL Placements with a PTSD Diagnosis, among Those with Any Disabling Mental Disorders, by Service, Calendar Years 2000 through 2007

Service	Calendar year								Calendar years 2000–2007 mean percent
	2000	2001	2002	2003	2004	2005	2006	2007	
Air Force	3	5	10	9	8	17	28	21	15
Army	11	8	8	10	28	39	48	53	33
Marine Corps.	6	4	2	3	15	51	60	52	38
Navy	6	3	6	3	14	20	18	20	12
DOD-wide total	8	5	7	7	20	33	41	43	26

Source: GAO analysis of Air Force, Army, and Navy PEB data.

Table 19: Final Disability Determinations as of August 2008 for TDRL Placements, by Service, Calendar Years 2000 through 2003

		Calendar year								Calendar years 2000–2003 total		
		2000		2001		2002		2003				
Service	Determination	Num	Pct	Num	Pct	Num	Pct	Num	Pct	Num	Pct	
Air Force	PDRL	184	55	183	48	151	48	159	57	677	52	
	Severance for permanent disability	102	31	155	41	115	37	78	28	450	34	
	No military disability benefits	17	5	14	4	7	2	6	2	44	3	
	Separated with unknown severance status	0	0	0	0	1	0 ^a	1	0 ^a	2	0 ^a	
	Return to active duty	3	1	11	3	16	5	16	6	46	4	
	Died before final determination	25	8	16	4	19	6	11	4	71	5	
	No final determination	3	1	3	1	5	2	10 ^a	4	21	2	
	Air Force total	334	100	382	100	314	100	281	100	1,311	100	
	Army	PDRL	577	60	663	64	619	59	549	55	2,408	59
		Severance for permanent disability	273	28	287	28	328	31	255	26	1,143	28
No military disability benefits		57	6	57	6	67	6	95	10	276	7	
Separated with unknown severance status		10	1	4	0 ^a	0	0	0	0	14	0 ^a	
Return to active duty		7	1	6	1	3	0 ^a	3	0 ^a	19	1	
Died before final determination		26	3	18	2	26	3	25	3	95	2	
No final determination		11	1	4	0 ^a	11	1	72 ^b	7	98	2	
Army total		961	100	1,039	100	1,054	100	999	100	4,053	100	
Marine Corps	PDRL	176	56	181	58	172	56	160	49	689	55	
	Severance for permanent disability	79	25	78	25	71	23	71	22	299	24	
	No military disability benefits	30	10	36	11	39	13	52	16	157	12	
	Separated with unknown severance status	0	0	0	0	2	1	0	0	2	0 ^a	
	Return to active duty	12	4	10	3	15	5	9	3	46	4	
	Died before final determination	12	4	8	3	4	1	9	3	33	3	
	No final determination	5	2	2	1	2	1	27 ^b	8	36	3	
	Marine Corps total	314	100	315	100	305	100	328	100	1,262	100	
Navy	PDRL	451	67	508	65	420	67	312	51	1,691	63	

Appendix II: Additional Data Tables

Service	Determination	Calendar year								Calendar years 2000–2003 total	
		2000		2001		2002		2003		Num	Pct
		Num	Pct	Num	Pct	Num	Pct	Num	Pct		
	Severance for permanent disability	102	15	124	16	98	16	99	16	423	16
	No military disability benefits	79	12	119	15	74	12	95	16	367	14
	Separated with unknown severance status	3	0 ^a	0	0	6	1	4	1	13	0 ^a
	Return to active duty	0	0	0	0	1	0 ^a	0	0	1	0 ^a
	Died before final determination	27	4	14	2	11	2	19	3	71	3
	No final determination	14	2	23	3	18	3	83 ^b	14	138	5
	Navy total	676	100	788	100	628	100	612	100	2,704	100
DOD-wide total	PDRL	1,388	61	1,535	61	1,362	59	1,180	53	5,465	59
	Severance for Permanent Disability	556	24	644	26	612	27	503	23	2,315	25
	No military disability benefits	183	8	226	9	187	8	248	11	844	9
	Separated with unknown severance status	13	1	4	0 ^a	9	0 ^a	5	0 ^a	31	0 ^a
	Return to active duty	22	1	27	1	35	2	28	1	112	1
	Died before final determination	90	4	56	2	60	3	64	3	270	3
	No final determination	33	1	32	1	36	2	192 ^b	9	293	3
	DOD-wide total	2,285	100	2,524	100	2,301	100	2,220	100	9,330	100

Source: GAO analysis of data from the Defense Manpower Data Center Retired Pay File.

Note: Percentages may not add to 100 due to rounding.

^aValue is less than 0.5 percent.

^bOur data request from DMDC yielded Retired Pay File records through August 2008. Thus, 138 (6 Air Force, 54 Army, 14 Marine Corps, and 64 Navy) of the cases shown as still on the TDRL in the 2000 through 2003 cohort had less than 5 years worth of data in our dataset. It is possible that some of these cases could have had final dispositions before or at 5 years that occurred after August 2008 and were not captured in our analysis.

Table 20: Number of Months until TDRL Placements for Calendar Years 2000 through 2003 Received a Final Determination, by Service

Months	DOD-wide		Air Force		Army		Marine Corps		Navy	
	Num	Pct	Num	Pct	Num	Pct	Num	Pct	Num	Pct
12 or less	551	6	88	7	411	10	17	1	35	1
13 to 24	2,559	27	790	60	1,293	32	132	11	344	13
25 to 36	1,205	13	212	16	595	15	172	14	226	8
37 to 48	1,182	13	94	7	533	13	212	17	343	13
49 to 60	2,670	29	88	7	808	20	550	44	1,224	45
More than 60	870	9	18	1	315	8	143	11	394	15
No final determination as of August 2008	293	3	21	2	98	2	36	3	138	5
Total	9,330	100	1,311	100	4,053	100	1,262	100	2,704	100

Source: GAO analysis of data from the Defense Manpower Data Center Retired Pay File.

Notes: Percentages may not add to 100 due to rounding.

Our data request from DMDC yielded Retired Pay File records through August 2008. Thus, 138 (6 Air Force, 54 Army, 14 Marine Corps, and 64 Navy) of the cases shown as still on the TDRL in the 2000 through 2003 cohort had less than 5 years worth of data in our dataset. It is possible that some of these cases could have had final dispositions before or at 5 years that occurred after August 2008 and were not captured in our analysis.

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Table 21: Initial Disability Ratings for TDRL Placements, DOD-wide, Calendar Years 2000 through 2007

Disability rating	Calendar year					
	2000		2001		2002	
	Num	Pct	Num	Pct	Num	Pct
0–20 percent	11	0 ^a	11	0 ^a	10	0 ^a
30 percent	1,124	49	1,357	54	1,230	53
40 percent	480	21	523	21	501	22
50–70 percent	360	16	359	14	294	13
80–90 percent	39	2	41	2	36	2
100 percent	271	12	233	9	230	10
Total	2,285	100	2,524	100	2,301	100

Appendix II: Additional Data Tables

2003		2004		2005		2006		2007		Calendar years 2000–2007 total	
Num	Pct	Num	Pct	Num	Pct	Num	Pct	Num	Pct	Num	Pct
4	0 ^a	8	0 ^a	9	0 ^a	5	0 ^a	7	0 ^a	65	0 ^a
1,137	51	1,677	54	1,935	54	1,913	51	2,026	49	12,399	52
504	23	682	22	835	23	826	22	944	23	5,295	22
309	14	389	12	512	14	694	18	806	20	3,723	16
31	1	57	2	61	2	78	2	74	2	417	2
235	11	304	10	261	7	258	7	247	6	2,039	9
2,220	100	3,117	100	3,613	100	3,774	100	4,104	100	23,938	100

Source: GAO analysis of Defense Manpower Data Center Retired Pay File.

Note: Percentages may not add to 100 due to rounding.

^aValue is less than 0.5 percent.

Table 22: Changes in Disability Ratings and Estimated Changes in Monthly Cash Payments, for Temporary Retirees Placed on the TDRL, DOD-wide, in Calendar Years 2000 through 2003 and Subsequently Transferred to the PDRL

Estimated change in monthly disability payments	Change in disability rating from initial placement on the TDRL to final placement on the PDRL			Total
	Disability rating increased	Disability rating decreased	No change in disability rating	
Monthly cash payments decreased	102	756	3,141	3,999
Monthly cash payments increased	382	0	0	382
No change in monthly cash payments	216	23	835	1,074
Total	700	779	3,976	5,455^a

Source: GAO analysis of data from the Defense Manpower Data Center Retired Pay File.

^aWe were not able to calculate a difference in ratings for 10 of the temporary retirees that were placed on the PDRL because data on their final ratings were missing.

Appendix III: Sample Army Form: Physical Evaluation Board Proceedings (DA Form 199)

PHYSICAL EVALUATION BOARD (PEB) PROCEEDINGS For use of this form, see AR 635-40; the proponent agency is USAPDA											
1. NAME (Last, First, Middle Initial)					2. RANK		3. PEBD: BASD:				
4. SOCIAL SECURITY NUMBER		5. PMOS	6. BRANCH / COMPONENT						c. Intentional misconduct, willful neglect or unauthorized absence		
7. THE PEB CONSISTED OF THE INDIVIDUALS INDICATED IN EXHIBIT A											
DATE CONVENED			AT (Location including ZIP Code)								
8. THE BOARD CONSIDERED THE MEMBER'S CONDITION DESCRIBED IN THE RECORDS. EACH DISABILITY IS LISTED BELOW in descending order of significance											
VA CODE a	DISABILITY DESCRIPTION b						g. Recommended disability percentage				
							c	d	e	f	g

DA FORM 199, JUN. 97

Appendix III: Sample Army Form: Physical
Evaluation Board Proceedings (DA Form 199)

Continued...

9. THE BOARD FINDS THE SOLDIER IS PHYSICALLY UNFIT AND RECOMMENDS A COMBINED RATING OF: AND THAT THE SOLDIER'S DISPOSITION BE:		
10. IF RETIRED BECAUSE OF DISABILITY, THE BOARD MAKES THE RECOMMENDED FINDING THAT: A. THE SOLDIER'S RETIREMENT _____ BASED ON DISABILITY FROM INJURY OR DISEASE RECEIVED IN THE LINE OF DUTY AS A DIRECT RESULT OF ARMED CONFLICT OR CAUSED BY AN INSTRUMENTALITY OF WAR AND INCURRING IN LINE OF DUTY DURING A PERIOD OF WAR AS DEFINED BY LAW. B. EVIDENCE OF RECORD REFLECTS THE SOLDIER _____ A MEMBER OR OBLIGATED TO BECOME A MEMBER OF AN ARMED FORCE OR RESERVE THEREOF, OR THE NOAA OR THE USPHS ON 24 SEPTEMBER 1975. C. THE DISABILITY _____ RESULT FROM A COMBAT RELATED INJURY AS DEFINED IN 26 U.S.C. 104.		
11. EXHIBITS (identify each)		
12. TYPED NAME, GRADE, BRANCH OF PRESIDENT	SIGNATURE	DATE

DA FORM 199, JUN. 97

Appendix IV: Sample Navy Form: Findings of the Physical Evaluation Board Proceedings

RECONSIDERATION		Findings of the Physical Evaluation Board Proceedings				Ref. #
Date Printed						Page 1

PERSONNEL DATA					
1. Name	2. SSN	3. Rate/Rank	4. Service	5. Desig.	6. LOS

PHYSICAL EVALUATION BOARD	
7. The Board convened at: NCPB, Washington DC, to consider the MedBoard originated at: San Diego, CA	
Board Membership Consisted of: Civ., CORB, Signature	
Capt., USN, Medical Officer	

FINDINGS		
8. Finding	9. Recommended Disposition	10. Combined Disability Rating

DIAGNOSES AND RATINGS		
Category I: Unfitting Conditions	VA Diagnostic Codes	Disability Rating or Reason if not rated
Category III: Conditions that are not separately unfitting and do not contribute to the unfitting condition(s)		

ADDITIONAL FINDINGS

11. a. The disability was incurred while entitled to receive basic pay.
b. The disability did not occur during a period of unauthorized absence.
c. The disability is not the result of intentional misconduct or willful neglect.
d. The disability did occur after 14 Sep 1978.

12. The disability may be permanent.

13. The disability did not result from a combat related injury as defined by Title 26 U.S. Code Section 104(b)(3).

14. All board members concurred.

President, PEB

Appendix V: Sample Air Force Form: Findings and Recommendations of the USAF Physical Evaluation Board (AF Form 356)

X		INFORMAL		FINDINGS AND RECOMMENDED DISPOSITION OF USAF PHYSICAL EVALUATION BOARD				DATE		
		FORMAL								
1. THE BOARD CONVENED AT				Randolph AFB TX 78150-4708		PER ATTACHED ORDERS (EXHIBIT A)				
2. A QUORUM WAS PRESENT AS INDICATED ON EXHIBIT A				3. EXHIBITS ATTACHED: A, B.						
4. MEMBER'S NAME (Last, First, Middle Initial)		5. GRADE		6. SSN		7. YEARS OF SERVICE UNDER 10 USC 1208		8. COMPONENT		
								X REG AF		
								USAFR		
								ANG		
9. FINDINGS CONCERNING INDIVIDUAL DEFECTS OR CONDITIONS										
COLUMN A - Include degree of severity. COLUMN C - Enter "YES" for in line of duty, "M" for intentional misconduct, "N" for willful neglect, "A" for incurred during a period of unauthorized absence, or "NA". COLUMNS B and D - Enter "YES", "NO", or "NA". COLUMNS E and F - Self-explanatory.						INCURRED WHILE IN LINE OF DUTY (See RAS, CH, HY)	LINE OF DUTY (Applies Only if Item 8B is YES)	PROMPT RESULT OF PHYSICAL EVALUATION (See RAS, USAFR, and ANG only)	DISABILITY RATING (Percent)	VA DIAGNOSTIC CODE
A. DIAGNOSIS						B.	C.	D.	E.	F.
CATEGORY I - UNFITTING CONDITIONS WHICH ARE COMPENSABLE AND RATABLE: NONE CURRENT RATING 00 LESS AGGRAVATING/CONTRIBUTORY FACTORS -00 COMBINED RATING 00 CATEGORY II - CONDITIONS THAT CAN BE UNFITTING BUT ARE NOT CURRENTLY COMPENSABLE OR RATABLE: NONE CATEGORY III - CONDITIONS THAT ARE NOT SEPARATELY UNFITTING AND NOT COMPENSABLE OR RATABLE: NONE										
10. ADDITIONAL FINDINGS								YES	NO	NA
A. MEMBER IS UNFIT BECAUSE OF PHYSICAL DISABILITY								X		
B. DISABILITY WAS INCURRED IN LINE OF DUTY IN TIME OF WAR OR NATIONAL EMERGENCY OR AFTER 14 SEPTEMBER 1978								X		
C. DISABILITY WAS THE DIRECT RESULT OF ARMED CONFLICT OR WAS CAUSED BY AN INSTRUMENTALITY OF WAR AND INCURRED IN LINE OF DUTY DURING A PERIOD OF WAR									X	
D. DISABILITY WAS THE DIRECT RESULT OF A COMBAT RELATED INJURY									X	
E. DEGREE OF IMPAIRMENT								IS	MAY BE PERMANENT	
11. COMPENSABLE PERCENTAGE				12. RECOMMENDED DISPOSITION						
13. OVERCOMES PRESUMPTION OF FITNESS				14. SIGNATURE OF PEB PRESIDENT OR PEB REPRESENTATIVE						
YES				NO				NA		
SEPARATION/RETIREMENT DATE:										
15. REMARKS										
CLINICS FOR TDRL EVALUATIONS										
N/A										

AF Form 356, OCT 95 PREVIOUS EDITION IS OBSOLETE

**Appendix V: Sample Air Force Form: Findings
and Recommendations of the USAF Physical
Evaluation Board (AF Form 356)**

BOARD MEMBER #1:
INITIALS:
COMMENTS:

BOARD MEMBER #2:
INITIALS:
COMMENTS:

BOARD PRESIDENT:
INITIALS:
COMMENTS:

Appendix VI: Comments on the TDRL from Disabled American Veterans



December 4, 2008

Delivery via E-mail

Mr. Mark E Ward
Senior Analyst
U.S. Government Accountability Office
Education, Workforce, and Income Security Issues
441 G Street, NW Rm. 5928
Washington, DC 20548

Dear Mr. Ward:

This letter serves as our feedback for consideration in the GAO review of policies and processes regarding the Temporary Disability Retired List (TDRL). Based on your GAO review, I reached out to several offices engaged in the DES system and have summarized three comments to each question in the tables below for your consideration.

➤ *What are the advantages & disadvantages of TDRL to Service Members?*

No.	Advantages
1	The main advantage of being placed on TDRL is the condition has not stabilized. This additional time allows the service member to become stable and be rated appropriately. During this time frame conditions may become worse with additional secondary problems arising or may become better and allow the service member to return to duty.
2	The Service Member will incur all military retirement privileges, to include I.D. card, base exchange and commissary privileges, TRICARE benefits, and participation in the Survivor Benefit Plan.
3	The retired pay of a TDRL member is the same as that of a member permanently retired for disability. <i>Exception:</i> While on the TDRL, the member does not receive less than 50 percent of the amount of monthly basic pay or RPB to which entitled at time of retirement. Except for cost of living increases, a TDRL member's retired pay will not change until removed from the list for permanent disposition. This is true even if the percentage rating changes following periodic examination.
No.	Disadvantages
1	It places the service member in limbo for 18 months. Being that this is "all new" to the service member, he/she has no clue what will happen to them. Instead of getting on with their lives, they will always have the uncertainty of what is going to be the final outcome. There is no reason to be placed on TDRL, the service member has probably been dealing with his/her medical problem for at least 6 to 12 months even before it goes to a medical evaluation board. If the Service member hasn't improved by then, they more than likely won't. Therefore, just make it permanent.
2	As every case is unique, my experience is some service members become slightly better while on TDRL. The main concern is that the disability percentage falls under the 30% rate and the service member is severed. Meanwhile, the service member is still considered unfit and no longer has military medical benefits.
3	We always have to wonder what's going to happen during our re-examination. To go through the medical evaluation board process all over again and not be on Active Duty is stressful to say the least. You never know what's going to happen. This process goes on for 5 years, if they find it necessary. So, you have another set of doctors who don't know your case specifically, making a decision on your life. Also, we are not afforded CRDP like the 20 year retirees. We served our country just like they did, some in battle. We did not

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**Appendix VI: Comments on the TDRL from
Disabled American Veterans**

ask to be injured, especially with Combat Related Injuries. We did not choose to leave the service; the decision was made for us. CRDP would be a great added benefit for those on the TDRL, especially if their injuries preclude them from finding gainful employment.

➤ *What are the advantages & disadvantages of TDRL to Service Members families?*

No.	Advantages
1	The first and obvious one would be that they get to use the same facilities they did while being in the military. This would make it almost transparent to them. My children are familiar with the BX, the Commissary, etc. They also get the benefit of using the same health insurance and in most cases can see the same doctors. Because of this, my children now have a pediatrician that knows their name and their history. We don't have to see a different one every time.
2	The primary advantage for families when service members are placed on the TDRL is the opportunity for them to assist the service member in recuperating and potentially returning to duty. TDRL does reduce the number of stressors and distractions that the service member is exposed to, allowing for a more singular focus on recovery.
3	Continued income; availability of TRICARE coverage for family; (at some military locations, privatization of post/base housing may allow retired members and their families to remain in place allowing children to remain in their schools); access to on-base employment.
No.	Disadvantages
1	The monetary issues that come with a significant reduction in compensation. The reduction in pay can prove difficult to manage.
2	Service members typically relocate, often to their home of record as noted above. In these circumstances, additional stress may be placed not only on the spouse and children but also on members of the extended family. This burden may be difficult as the spouses tries to manage the household, the military member's recovery (physical therapy, medications, appointments, etc.) and any work outside the home in an effort to obtain additional income to make ends meet, etc.
3	A majority of service members don't return to active duty, but are instead separated because, although their conditions may have stabilized, they are no longer fit for duty. Usually they receive a one-time lump sum payment because separated from the military under a Discharge With Severance Pay category with a 0%, 10% or 20% disability rating and receive a lump sum payment. This is the more likely outcome as these conditions typically stabilize at a lower disability rating than when first injured. On occasion, if the disability rating is 30% or greater, they may be permanently retired and receive monthly compensation for their lifetime.

➤ *How well is the re-evaluation process administered for those on TDRL?*

No.	Advantages
1	Service Members are not adequately informed on the importance between evaluations of continuing to receive treatment and keeping accurate records of symptoms and treatment from military clinics, military treatment facilities (MTFs), VA clinics and medical centers, and civilian treatment facilities. Also, many service members are working and don't understand the importance of continued treatment, albeit sometimes it's difficult to take off work. This lack of treatment and documentation makes it easy for the military to reduce an evaluation to less than 30%, which leads to "fit for duty" or "disability severance pay."
2	The requirement for 18 month reevaluations lays an additional burden on the member to travel to a military treatment facility for a reexamination with a doctor that they may not have seen before and therefore have no established therapeutic relationship. This makes it more difficult for the service member to disclose information to the doctor which impacts the accuracy of the medical opinion the physician is required to provide the Disability Evaluation System. This adds further complexity to the recovery.
3	I see no problem with the overall process; perhaps it is not briefed well enough to the service member and his/her family. It seems to me that the service member has enough to worry about on what is going on with their care and the decision of the PEB to concern themselves with what will happen in 18 months time.

**Appendix VI: Comments on the TDRL from
Disabled American Veterans**

In closing, we (DAV) appreciate the opportunity to provide feedback for your consideration. Please know we are available for consultation and hope you find this document helpful as we work together *Building Better Lives for our Nation's Disabled Veterans and their Families*.

Sincerely,



EDWARD R. REESE, JR.
National Service Director

ERR:ejh

Appendix VII: Comments on the TDRL from Iraq and Afghanistan Veterans of America



IRAQ *and* AFGHANISTAN VETERANS *of* AMERICA

+ Advantages and Disadvantages of the TDRL to Service Members

- (1) What are the advantages of being placed on the TDRL for service members?
 - a. The primary advantage to TDRL is the protection that it provides to injured servicemember if they are able / willing to return to active service. Typically, if one returns to the military after a long break in service, they re-enter with reduced rank and pay due to various administrative and professional obstacles during the period of separation. TDRL provided protections in rank and pay while the servicemember undergoes recovery and treatment.
 - b. In some cases, placement on TDRL may allow a service member time to resolve medical issues that have previously been found unfit for duty so they may return to Active Duty status after re-evaluation. Sometimes, when a service member is assigned to a Warrior Transition Unit for an extended period of time, they do not feel like they are a part of the military any more. They may be assigned a job they did not sign up for, nor enjoy doing. TDRL gives them the freedom to convalesce in a way they feel is most beneficial to their recovery.
 - c. If a service member is entitled to VA compensation at a greater rate than their military pay, and they feel VA is able to adequately provide their medical care, they can elect to receive VA compensation.
 - d. If the service member is ready to utilize such VA benefits as Compensated Work Therapy, Independent Living Services, or the Vocational Rehabilitation and Employment Program, they are able to access these services. Active Duty service members are allowed limited access to VA benefits and programs.
 - e. Allows for the permanent retirement or separation without going through the administrative steps of returning or appointment to active duty to initiate the retirement/separation process.
- (2) What are the disadvantages of being placed on the TDRL for service members?
 - a. Service members are placed on TDRL because their medical condition has not stabilized for rating purposes. Even though these individuals often require ongoing medical treatment and rehabilitation, they have access to fewer health care options on TDRL. While on Active Duty, a service member can be treated for most anything at a military treatment facility (MTF), a private facility, or a VA medical center. Once retired, however, TRICARE coverage is more limited. In the case of TBI, cognitive therapies necessary for rehabilitation are not covered at all, unless the service member is on Active Duty. This limits the service members' options for specialty care mainly to VA medical centers which may not always be the best option for that service member's needs.

- b. Service members that are placed on TDRL following acute care do not have the same psychosocial advantages as those that are allowed to continue on Active Duty for intermediate rehabilitation. Becoming severely disabled is a life altering event. Removing a service member from a familiar environment while they are trying to adjust to their new life can be further devastating. It is important to be among peers and feel like a service member during recovery.
- c. When a service member is placed on TDRL they are caught between two worlds. They are still accountable to DOD, but do not receive any of the benefits, such as creditable years toward retirement, CRSC, or coverage under Title 10.
- d. If a service member is placed on TDRL, as opposed to being permanently retired, their disability rating may be lowered upon re-evaluation.

+ Advantages and Disadvantages of the TDRL to Service Members' Families

- (3) What are the advantages of being placed on the TDRL for service members' families?
 - a. Provides a mechanism for servicemembers to access DOD care and recovery while they are on temporary retirement. Their families are not beholden to live on or adjacent to military installations, but in their homes of record if they so choose.
- (4) What are the disadvantages of being placed on the TDRL for service members' families?
 - a. When a service member is placed on TDRL, they are considered retired for most purposes. The family is no longer eligible for base housing or schools. When a service member is severely wounded, the entire family goes through their own grief. Being removed from their community, culture, and support network can be further devastating to a family trying to adjust to their new situation.
 - b. If the service member needs to travel to an MTF or a TRICARE facility for follow on medical treatment after being placed on TDRL, neither the family member caregiver, nor the service member's dependants are eligible for Non-Medical Attendant orders as they would be on Active Duty status.
 - c. A service member on TDRL may be required to report to an MTF multiple times for re-evaluation appointments over a period of time up to five years. If the service member is unable to travel unattended, this responsibility often falls on a family member. These evaluations are not scheduled at the convenience of the family member, can result in lost wages, and jeopardize their employment.

+ Administration of the TDRL Process

- (5) How well is the re-evaluation process administered for those on the TDRL?
- a. Service members are placed on TDRL because their medical condition has not stabilized for rating purposes. At the time of placement on TDRL the full extent of their injuries are still unknown and others may still be undiagnosed. A service member is only re-evaluated for the conditions for which they were placed on TDRL. Any new injuries or issues that surface afterward are not added to the final board even if they were caused by the same mechanism of injury. A service member should have a complete re-evaluation of all body systems and any issues related to the cause of injury should be added to the final board.
 - b. There are concerns about what constitutes a stable condition vs. a controlled condition. The potential of long term ailments such as diabetes or arthritis can become much more severe over time. While the conditions can be controlled long term, the potential for a serious increase in disability is always there while their rating cannot be adjusted. If an injury or ailment persists throughout the 5 year TDRL process, and it is controlled through a method of treatment or medication, is it truly stable? Disability ratings are done at the point of "stability" not based on the potential for future debilitation.
 - c. The effects of TBI and PTSD do not factor well in to the TDRL model. While there procedures are being currently reviewed and revised within the DOD and VA systems, the system was set up for physical medical conditions and do not fit well with mental or neurological conditions.
 - d. Often, a service member is sent to an MTF closest to their home of record for re-evaluation, not a center of excellence for their particular disabilities. The quality of an evaluation can impact a rating decision and contribute to inconsistent results.
 - e. Service members need to be educated about the TDRL re-evaluation and board process. They should be explained their rights and assigned an advocate that will ensure their board is handled properly, particularly in the case of a service member that is not competent to participate in proceedings on their own. DOD should not assume the family member is capable of handling the proceedings for the service member and provide legal counsel when necessary.
 - f. Legal counsel should be made available to the service member or their family when the re-evaluation is initiated, not after the appeal process is already under way.

+ Other Issues

- (6) What, if any, other issues regarding the TDRL has your organization identified? (You may also attach any reports, studies, or testimony regarding the TDRL as part of your response to these questions.)
- a. In the Army, an MEB is initiated when either optimal care has been met or a doctor determines the Soldier will not return to Active Duty. This causes a lot of inconsistency and inequity. Seriously injured soldiers, who may have

the potential to continue on Active Duty, are not retired as quickly as severely injured soldiers, who clearly will not. Optimal care should be met in all cases whenever possible. When it is not, severely injured service members should be given a reasonable amount of time for their condition to stabilize, so they may take advantage of benefits under Title 10, allow their family to adjust to their new situation, and fully understand their options before the MEB/PEB process begins. While it is not the mission of DOD to provide long-term care, allowing this period of time shows compassion, and reflects the enormous sacrifice made by these service members and their families.

- b. The current regulations are a disincentive for DOD to allow severely injured service members to defer placement on TDRL, not only because of the cost of coverage under Title 10. Time on TDRL is not creditable towards retirement, nor can a service member collect CRSC until they are permanently retired. By placing a service member on TDRL, DOD can reduce their creditable years toward retirement, and at the same time, do not have to pay them CRSC for up to five years. In many cases, DOD will not have to pay the service member anything during that time, since they are eligible to receive VA compensation on TDRL.
- c. Each service member's circumstances are unique and should be evaluated on a case-by-case basis to determine whether a Warrior Transition Unit, TDRL, or PDR is the best option for their individual needs.

Appendix VIII: Comments on the TDRL from the Military Officers Association of America



February 25, 2009

Mark E. Ward, Senior Analyst
United States Government Accountability Office Education, Workforce, and Income Security Issues
441 G Street, NW Room 5928
Washington, D.C. 20548

Dear Mr. Ward:

Thank you for your inquiry regarding the Temporary Disability Retirement List. On behalf of the Military Officers Association of America (MOAA), I would like to provide the following responses to your questions as well as what we believe should be the overall philosophy for disabled service members and their families.

Advantages and Disadvantages of the TDRL to Service Members

(Q1) What are the advantages of being placed on the TDRL for service members?

Answer: There is an advantage to the service member to be placed on the TDRL; specifically, the TDRL provides the service member a temporary retirement status for up to five years with many of the same retiree benefits as if the member had retired for 20 years of service even though they have an unfitting condition that is still unstable. Once a member's condition stabilizes, the TDRL will provide an opportunity for the service member to return to duty if their condition improves to the point where they are deemed "fit for duty".

The member will also be in receipt of retired pay calculated at a minimum of 50% of their basic pay or based on their years of service, whichever is more beneficial. Finally, the TDRL gives the service member the opportunity to file a claim for VA benefits and assistance, and in some cases, be eligible to receive both VA compensation and retired pay (CRSC or CRDP).

(Q2) What are the disadvantages of being placed on the TDRL for service members?

Answer: The major disadvantage is that the service member is no longer on "active duty" and forfeits the compensation, allowances, and special pays that they had been receiving to include access to on-base housing or housing allowances. Additionally, they lose "active duty"-level TRICARE/dental benefits for themselves and their family members; however, are eligible to receive retired-level TRICARE benefits.

Also, in some cases when the member files for VA compensation, the VA compensation amount offsets dollar-for-dollar their disability retired pay and are eligible to receive treatment in VA medical facilities.

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Advantages and Disadvantages of the TDRL to Service Members' Families

(Q3) What are the advantages/disadvantages of being placed on the TDRL for service members' families?

Answer: There is very little "advantage" to the family of a service member being placed on the TDRL. Their lives end up being placed in a temporary status waiting for a final decision from the Service to either return their spouse to active duty or permanently retire them. The "limbo status" is further exacerbated as they lose their access to base housing (or the housing allowance), active duty TRICARE medical care and access, and the stability provided by several base support programs – on base schools, day care, youth centers, etc. Additionally, in some few cases, the family will lose their eligibility/access to special programs such as the ECHO program, spouse preference, or even family medical leave (if they are a working spouse).

Administration of the TDRL Process

(Q4) How well is the re-evaluation process administered for those on the TDRL?

Answer: We have not received any positive or negative feedback on the TDRL's eighteen month re-evaluation process.

Other Issues

(Q5) What, if any, other issues regarding the TDRL has your organization identified? (You may also attach any reports, studies, or testimony regarding the TDRL as part of your response to these questions.)

Answer: The TDRL is designed to assist the Services more than the service member. The Services can place a service member off of active duty and off their end strength temporarily with the outside chance of bringing the member back on active duty if their condition stabilizes and is no longer unfitting. The Services cut their costs, while the service member and their family must wait up to five years for a final disposition.

For the service member wishing to continue to serve their country, this course of action may be beneficial. But for the families who wish to move on to the next chapter of their lives, the TDRL process creates more family instability rather than stability.

Overall philosophy: In general, the Services should strive to retain the member on active duty as long as there is a reasonable prospect for stabilizing their condition within some reasonable period (possibly 12 months). This provides needed continuity for the family during a time when the focus needs to be on the health of the member rather than on fear of "what will happen to me on a range of pay and benefits and eligibility issues if we make this or that decision" and the trepidation of making a bad decision based on misunderstandings or misinformation.

Being placed on disability retirement (temporary or permanent) entails some significant implications for treatment of the member and family to the extent the member still requires a treatment regimen, and especially if cognitive therapy is required. When a member is disability retired:

- A. TDY payments to family caregivers ceases
- B. Eligibility for subsidized family dental coverage ceases
- C. TRICARE Standard coverage beneficiary cost-sharing (for both the member and family members) rises from 20% to 25%
- D. For certain severely disabled service members, they must begin paying Medicare Part B premiums (almost \$100 a month) in order to stay eligible for TRICARE (as second payer to Medicare)
- E. Those needing cognitive therapy can find themselves in a bind, since TRICARE will pay for this care for retirees only if the VA doesn't have it reasonably available (there is high potential for each department disagreeing over who makes this determination and what the definition of "reasonably available" means)

We believe strongly that these kinds of discrepancies demand a fix to make people who are forced into medical retirement for service-caused conditions eligible for active duty-level care and benefits (including cognitive therapy, family health and dental coverage, and per diem for caregivers) for at least three years after leaving active duty.

Again, thank you for your inquiry and if you need further assistance, I can be reached by phone at (703) 838-8123 or by email at mikeh@mqaa.org.

Sincerely,



Col Michael F. Hayden, USAF (Ret)
Deputy Director, Government Relations

Appendix IX: Comments from the Department of Defense



PERSONNEL AND
READINESS

OFFICE OF THE UNDER SECRETARY OF DEFENSE
4000 DEFENSE PENTAGON
WASHINGTON, D.C. 20301-4000

Mr. Daniel Bertoni
Director
Education, Workforce, and Income Security
U.S. Government Accountability Office
441 G Street, N.W.
Washington, DC 20548

MAR 25 2009

Dear Mr. Bertoni,

This letter provides the Department of Defense (DoD) response to the GAO draft report, GAO-09-289, 'MILITARY DISABILITY RETIREMENT: Closer Monitoring Would Improve the Temporary Retirement Process,' dated March 12, 2009 (GAO Code 130839)."

The Department appreciates the opportunity to collaborate with the GAO in identifying areas within the administration of the Temporary Disability Retired List (TDRL) for emphasis to better support our Service men and women as they more fully recover and rehabilitate from a wound, illness, or injury.

Each of the Military Departments has processes and organizations in place to support the needs of Service members placed on the TDRL. As with any support mechanism, these work best when accessed by those in need.

The Department supports the recommendations contained in the report except as noted. Specific comments are provided in the attachment to this letter.

Sincerely,

A handwritten signature in black ink, appearing to read "Keith W. Meurlin", is positioned above the typed name.

KEITH W. MEURLIN, Maj Gen, USAF
Acting Director
Transition Policy & Care Coordination Office

Attachments:
As stated

GAO DRAFT REPORT – DATED MARCH 12, 2009
GAO CODE 130839/GAO-09-289

**"MILITARY DISABILITY RETIREMENT: Closer Monitoring Would Improve
the Temporary Retirement Process"**

**DEPARTMENT OF DEFENSE COMMENTS
TO THE RECOMMENDATIONS**

RECOMMENDATION 1: The GAO recommends that the Secretary of Defense direct the Secretaries of the Army, Navy, and Air Force to better inform their decisions about whether or not to place or retain someone on the Temporary Disability Retired List (TDRL) by taking into account data from past TDRL cases on outcomes for particular types of disabilities to ensure that TDRL placement and retention decisions are appropriate and consistent.

DOD RESPONSE: Concur with comment. While common conditions may lead to similar outcomes, it is always necessary to recognize that individuals with one similar condition may have differing additional conditions that could lead to variances in final outcomes and dispositions.

RECOMMENDATION 2: The GAO recommends that the Secretary of Defense direct the Secretaries of the Army, Navy, and Air Force to systematically review the appropriateness and consistency of each Service's physical evaluation board (PEB) decisions regarding the stability of disabilities to ensure that TDRL placement and retention decisions are appropriate and consistent.

DOD RESPONSE: Concur.

RECOMMENDATION 3: The GAO recommends that the Secretary of Defense direct each Service to track and periodically report on the timeliness of medical reexaminations in TDRL cases to ensure that TDRL reexaminations occur at least once every 18 months.

DOD RESPONSE: Concur. Based in part on input from OASD (HA), the Department will both direct the Military Departments to conduct reexaminations at no longer than an 18 month interval, but also support reexaminations within a shorter duration based on Congressional guidance (e.g., six months for PTSD) or the time duration recommended by the treating physician.

RECOMMENDATION 4: The GAO recommends that the Secretary of Defense develop DOD-wide standards and goals for the timeliness of TDRL reexaminations to ensure that TDRL reexaminations occur at least once every 18 months.

DOD RESPONSE: Concur. Please see the response to Recommendation 3, above.

RECOMMENDATION 5: The GAO recommends that the Secretary of Defense establish a clearer policy specifying how the services should enforce the requirements that temporary retirees submit to periodic reexaminations and notify TDRL administrators when they have a change of address to ensure that TDRL reexaminations occur at least once every 18 months.

DOD RESPONSE: Concur with comment. Each of the Departments provide Service members specific directions regarding the requirement for periodic reexaminations and the importance of maintaining current contact information. It is not reasonable to assume that DoD can keep track of every change of address if an individual on the TDRL fails to submit same to the Military Departments' TDRL section.

RECOMMENDATION 6: The GAO recommends that the Secretary of Defense expand the use of non-military physicians for conducting TDRL reexaminations to ensure that TDRL reexaminations occur at least once every 18 months.

DOD RESPONSE: Concur with comment. This recommendation should include the statement that the non-military physicians are both trained in and will accept examinations of individuals using VA-approved templates. Additionally, usage of non-military physicians should also include specific reference to reexaminations at non-military and non-VA facilities given training and qualification consistent with Title 10 and Title 38, USC.

RECOMMENDATION 7: The GAO recommends that the Secretary of Defense direct the Services to ensure that temporary retirees receive a final determination upon expiration of their five years on the TDRL, as required by law to prevent unnecessary delays in permanent disability determinations for temporary retirees, and gaps in the receipt of disability benefits to which they are entitled.

DOD RESPONSE: Concur. Each Service member on the TDRL is entitled (and encouraged) to engage with the VA to initiate benefits for which they are eligible. These benefits can be obtained well before reaching the expiration of TDRL eligibility. The DoD will work with the Military Departments to identify administrative process improvements that will reduce or eliminate instances where a Service member exceeds the five year tenure on the TDRL prior to receiving a final disposition. The Department also intends to pursue a legislative change to Section 1210(e), Title 10, USC, to address the variances introduced into the TDRL process due to differing interpretations of the phrase "permanent and stable". Existing medical terminology uses the wording "maximum medical improvement" to identify decision points and status during the course of care and recovery. Use of this phrase throughout Chapter 61 of Title 10, USC, instead of the word 'stable' would better reflect how an individual's condition is assessed by medical caregivers, and reduce the possibility of an individual exceeding the current allowable duration on the TDRL.

RECOMMENDATION 8: The GAO recommends that the Secretaries of the Army, Navy and Air Force assess the adequacy of information they provide regarding the TDRL, including the information contained on their PEB findings forms and other materials, and provided by PEB Liaison Officers, and make improvements where needed to ensure that temporary retirees receive adequate information to understand why they are placed on the list and the importance of complying with TDRL requirements.

DOD RESPONSE: Concur. While addressed to the Secretaries of the Military Departments, DoD will strive to ensure that Service members placed on the TDRL receive information that provides an explanation of both the TDRL and the specific medical condition(s) that led to that placement.

RECOMMENDATION 9: The GAO recommends that the Secretaries of the Army, Navy and Air Force; take steps to encourage ongoing contact between temporary retirees and TDRL administrators by, for example, maintaining a working and easily accessible TDRL administrative telephone hotline for temporary retirees to ensure that temporary retirees receive adequate information to understand why they are placed on the list and the importance of complying with TDRL requirements.

DOD RESPONSE: Concur. Please see the response to Recommendation 5. There are multiple Service-level efforts in place to provide information regarding the TDRL to Service members. Each of the Military Departments have telephonic contact numbers in place, as well as specific e-mail addresses available to provide information, support, and guidance.

RECOMMENDATION 10: The GAO recommends that the Secretaries of the Army, Navy and Air Force improve access to Web-based information about the TDRL to ensure that temporary retirees receive adequate information to understand why they are placed on the list and the importance of complying with TDRL requirements.

DOD RESPONSE: Concur. Again, please consider the responses to Recommendations 5 and 9. Information regarding why an individual may be placed on the TDRL, what the requirements are once placed on the list, and points of contact to address questions or problems are readily available from each Military Department. DoD will work with each Service to ensure that the information available from each of these sources is current and accessible.

Appendix X: GAO Contact and Staff Acknowledgments

GAO Contact

Daniel Bertoni, (202) 512-7215 or bertonid@gao.gov

Staff Acknowledgments

Clarita Mrena (Assistant Director), Regina Santucci (Analyst-in-Charge), Salvatore Sorbello, Mark Ward, John Fisher, and Susan Bernstein made major contributions to this report. Walter Vance, Beverly Ross, and Anna Maria Ortiz assisted with study design and data analysis; James Rebbe and Doreen Feldman provided legal advice; Almeta Spencer assisted with study processing; Mimi Nguyen and Armetha Liles assisted with graphics; and Holly Dye assisted with editing.

Related GAO Products

Traumatic Brain Injury: Better DOD and VA Oversight Can Help Ensure More Accurate, Consistent, and Timely Decisions for the Traumatic Injury Insurance Program. [GAO-09-108](#). Washington, D.C.: January 29, 2009.

Military Disability Systems: Increased Supports for Servicemembers and Better Pilot Planning Could Improve the Disability Evaluation Process. [GAO-08-1137](#). Washington, D.C.: September 24, 2008.

DOD and VA: Preliminary Observations on Efforts to Improve Care Management and Disability Evaluations for Servicemembers. [GAO-08-514T](#). Washington, D.C.: February 27, 2008.

VA Health Care: Mild Traumatic Brain Injury Screening and Evaluation Implemented for OEF/OIF Veterans, but Challenges Remain. [GAO-08-276](#). Washington, D.C.: February 8, 2008.

DOD and VA: Preliminary Observations on Efforts to Improve Health Care and Disability Evaluations for Returning Servicemembers. [GAO-07-1256T](#). Washington, D.C.: September 26, 2007.

Military Disability Evaluation: Ensuring Consistent and Timely Outcomes for Reserve and Active Duty Service Members. [GAO-06-561T](#). Washington, D.C.: April 6, 2006.

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